Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 1 of 65

| Fill in this information to identify your case:                                 |  |
|---|--|
| United States Bankruptcy Court for the:  Northern District of: Illinois (State) |  |
| Case number (if known)  | Chapter you are filing under:              |
|   | Chapter 7 Chapter 11 Chapter 12 Chapter 13 |

#### Official Form 101

#### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself   |                            |   |
|---|----------------------------|---|
|   | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name  | Lamare                     |   |
| Write the name that is on   | First name                 | First name                                    |
| your government-issued picture identification (for                  | Middle name                | Middle name                                   |
| example, your driver's  | Stewart                    |   |
| license or passport   | Last name                  | Last name                                     |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. All other names you  |                            |   |
| have used in the last   | First name                 | First name                                    |
| 8 years   |                            |   |
| Include your married or   | Middle name                | Middle name                                   |
| maiden names.   | Last name                  | Last name                                     |
|   | First name                 | First name                                    |
|   | Middle name                | Middle name                                   |
|   | Last name                  | Last name                                     |
| 3. Only the last 4 digits of your Social                            | XXX - XX- 2436             |   |
| Security number or<br>federal Individual                            | OR                         | OR  |
| Taxpayer Identification number                                      | 9 xx - xx-                 | 9 xx - xx-                                    |

# Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 2 of 65

| D  | ebtor 1 Lamare<br>First Name                           | Stewart  Middle Name Last Name  | Case number (if known)   |
|----|--|---|--|
|    |  |   |  |
|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |
| 4. | Any business names and Employer                        | I have not used any business names or EINs.   | I have not used any business names or EINs.  |
|    | Identification Numbers (EIN) you have used in the last | Business name   | Business name  |
|    | 8 years  | Business name   | Business name  |
|    | Include trade names and doing business as names        | EIN   | EIN  |
|    |  | EIN   | EIN  |
| 5. | Where you live   |   | If Debtor 2 lives at a different address:  |
|    |  | 8525 S. Green  Number Street  | Number Street  |
|    |  | Chicago Illinois 60620 City State Zip Code  | City State Zip Code  |
|    |  | Cook  | County   |
|    |  | County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|    |  | Number Street   | Number Street  |
|    |  |   |  |
| _  |  | City State Zip Code   | City State Zip Code  |
| 6. | Why you are choosing this district                     | Check one:  | Check one:   |
|    | to file for bankruptcy                                 | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                               |
|    |  | I have another reason. Explain. (See 28 U.S.C. §§ 1408.)  | I have another reason. Explain. (See 28 U.S.C. §§ 1408.)   |
|    |  |   |  |
|    |  |   | _  |
|    |  |   |  |
|    |  |   |  |
|    |  |   |  |

## Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 3 of 65

| Debtor                                   | 1 Lamare   |   | Stewart   |  | Case number (if kno  | own)   |  |
|--|--|---|---|--|--|--|--|
|  | First Name   | Middle Name   | Last Name   |  |  |  |  |
| Part 2:                                  | <b>Tell the Court Abo</b>  | ut Your Bankruptcy C  | ase   |  |  |  |  |
| Ba                                       | e chapter of the<br>nkruptcy Code you<br>e choosing to file<br>der   |   | description of each, see No (0)). Also, go to the top of pa   |  |  | C. § 342(b) for Individuals Filing for opriate box.  |  |
| 8. Ho<br>fee                             | w you will pay the   | more details about cashier's check, or may pay with a cre  I need to pay the findividuals to Pay  I request that my judge may, but is rethe official poverty you choose this op | thow you may pay. Typic money order If your at dit card or check with a present in the installments. If your Filing Fee in Install fee be waived (You may not required to, waive your line that applies to your | cally, if you torney is one-printout choose aments (Control of the control of the | ou are paying the submitting you ed address. ethis option, sign official Form 103 this option only ad may do so onlize and you are used. | the clerk's office in your local coe fee yourself, you may pay with r payment on your behalf, your agn and attach the <i>Application for SA</i> ).  If you are filing for Chapter 7. By if your income is less than 150 unable to pay the fee in installment of the Chapter 7 Filing Fee Waived (Contact of the Chapter 7 Filing Fee Waived (Con | cash,<br>attorney<br>By law, a<br>0% of<br>ents). If |
| baı                                      | ve you filed for<br>nkruptcy within the<br>t 8 years?  | Ves. District District District   |   | When When When   | MM / DD / YYYY  MM / DD / YYYY  MM / DD / YYYY   | Case number  Case number  Case number  |  |
| cas<br>bei<br>spo<br>filir<br>you<br>par | e any bankruptcy<br>ses pending or<br>ng filed by a<br>buse who is not<br>ng this case with<br>u, or by a business<br>rtner, or by an<br>iliate? | Ves. Debtor District Debtor District  |   | When<br>When   | MM / DD / YYYY   | Relationship to you  Case number, if known  Relationship to you  Case number, if known   |  |
|  | you rent your<br>sidence?  | ✓ No. Go to   | o line 12.  |  |  | o you want to stay in your residence?  st You (Form 101A) and file it with   | ?  |

### Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 4 of 65

Debtor 1 Lamare Stewart \_\_ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. **|** For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 5 of 65

 Debtor 1 First Name
 Lamare Stewart
 Case number (if known)

 Last Name
 Last Name

| Pa  | rt 5: Explain Your Effor   | rts to Receive a Brie   | fing About Credit Counseling   |   |   |  |  |
|---|--|---|--|---|---|--|--|
|   |  | About Debtor 1:   |  | Al  | bout Debtor 2 (Sp   | oouse Only in a Joint Case):   |  |
| 15.   | Tell the court   | You must check one:   |  | Yo  | ou must check one:  |  |  |
|   | whether you have received briefing about credit counseling.                            | counseling agen   | ing from an approved credit<br>cy within the 180 days before I<br>ptcy petition, and I received a<br>npletion.   |   | counseling ager   | ing from an approved credit<br>ncy within the 180 days before I<br>ptcy petition, and I received a<br>npletion.  |  |
|   | The law requires that you receive a briefing   |   | he certificate and the payment plan, veloped with the agency.  |   |   | he certificate and the payment plan, veloped with the agency.  |  |
| coo<br>file<br>Yo<br>che<br>foll<br>you   | about credit<br>counseling before you<br>file for bankruptcy.<br>You must truthfully   | counseling agen   | ing from an approved credit<br>cy within the 180 days before I<br>ptcy petition, but I do not have a<br>npletion.  |   | counseling ager   | ring from an approved credit<br>ncy within the 180 days before I<br>ptcy petition, but I do not have a<br>npletion.  |  |
|   | check one of the following choices. If you cannot do so, you are not eligible to file. |   | er you file this bankruptcy petition, opy of the certificate and payment   |   |   | er you file this bankruptcy petition, opy of the certificate and payment   |  |
| If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your |  | from an approve obtain those ser made my reques                   | ked for credit counseling services<br>d agency, but was unable to<br>vices during the 7 days after I<br>t, and exigent circumstances<br>emporary waiver of the                   | ency, but was unable to during the 7 days after I d exigent circumstances  from an approv obtain those so made my reque |   | asked for credit counseling services<br>wed agency, but was unable to<br>services during the 7 days after I<br>sest, and exigent circumstances<br>temporary waiver of the        |  |
| credit<br>collec  | creditors can begin<br>collection activities<br>again.                                 | requirement, attac<br>efforts you made t<br>unable to obtain it   | ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were before you filed for bankruptcy, and imstances required you to file this     |   | requirement, attace efforts you made unable to obtain it              | ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were before you filed for bankruptcy, and umstances required you to file this     |  |
|   |  |   | e dismissed if the court is dissatisfied<br>for not receiving a briefing before<br>ruptcy.   |   |   | e dismissed if the court is dissatisfied<br>for not receiving a briefing before<br>ruptcy.   |  |
|   |  | receive a briefing<br>must file a certifica<br>with a copy of the | fied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed. |   | receive a briefing<br>must file a certification<br>with a copy of the | fied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed. |  |
|   |  |   | ne 30-day deadline is granted only mited to a maximum of 15 days.  |   |   | he 30-day deadline is granted only mited to a maximum of 15 days.  |  |
|   |  | I am not required counseling beca                                 | d to receive a briefing about credit use of:   |   | I am not required counseling beca                                     | d to receive a briefing about credit ause of:  |  |
|   |  | ☐ Incapacity.   | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.   |   | Incapacity.   | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.   |  |
|   |  | Disability.   | My physical disability causes me to<br>be unable to participate in a<br>briefing in person, by phone, or<br>through the internet, even after I<br>reasonably tried to do so.     |   | Disability.   | My physical disability causes me to<br>be unable to participate in a<br>briefing in person, by phone, or<br>through the internet, even after I<br>reasonably tried to do so.     |  |
|   |  | Active duty.  | I am currently on active military duty in a military combat zone.  |   | Active duty.  | I am currently on active military duty in a military combat zone.  |  |
|   |  | about credit coun   | are not required to receive a briefing seling, you must file a motion for punseling with the court.  |   | about credit cour   | are not required to receive a briefing seling, you must file a motion for ounseling with the court.  |  |

#### Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Mair Document Page 6 of 65

Debtor 1 Lamare Stewart Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Lamare Stewart Signature of Debtor 1 Signature of Debtor 2 Executed on \_ 3/3/2017 Executed on MM / DD / YYYY MM / DD / YYYY

## Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 7 of 65

| Debtor 1 Lamare                                  |                            | Stewart               | Case number (if k            | rnown)   |
|--|----------------------------|-----------------------|------------------------------|--|
| First Name                                       | Middle Name                | Last Name             |                              |  |
| For your attorney, if you are represented by one | eligibility to proceed und | der Chapter 7, 11, 12 | 2, or 13 of title 11, United | ave informed the debtor(s) about<br>I States Code, and have explained the<br>so certify that I have delivered to the |
| If you are not                                   | debtor(s) the notice requ  | ired by 11 U.S.C. §   | 342(b) and, in a case in w   | hich § 707(b)(4)(D) applies, certify that I  |
| represented by an                                | have no knowledge after    | an inquiry that the   | information in the schedu    | ules filed with the petition is incorrect.   |
| attorney, you do not                             |                            |                       |                              | ·  |
| need to file this page.                          | /s/ Megan Holmes           |                       | Date                         | 3/3/2017   |
|  | Signature of Attorney f    | or Debtor             | M                            | M / DD / YYYY  |
|  | ,                          |                       |                              |  |
|  |                            |                       |                              |  |
|  | Megan Holmes               |                       |                              |  |
|  | Printed name               |                       |                              |  |
|  | Semrad Law Firm            |                       |                              |  |
|  | Firm name                  |                       |                              |  |
|  | 11101 S. Western Ave       | nue                   |                              |  |
|  | Street                     |                       |                              |  |
|  |                            |                       |                              |  |
|  |                            |                       |                              |  |
|  | Chicago                    |                       | Illinois                     | 60643  |
|  | City                       |                       | State                        | Zip Code   |
|  |                            |                       |                              |  |
|  | Contact phone              | 3128374019            | Email address                | mholmes@semradlaw.com  |
|  |                            |                       |                              |  |
|  |                            |                       | Illinois                     |  |
|  | Bar number                 |                       | State                        |  |

#### Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 8 of 65

| Fill in this infor     | mation to identify your c | ase:        |                      |
|------------------------|---------------------------|-------------|----------------------|
| Debtor 1               | Lamare                    |             | Stewart              |
|                        | First Name                | Middle Name | Last Name            |
| Debtor 2               |                           |             |                      |
| (Spouse, if filing)    | First Name                | Middle Name | Last Name            |
| United States E        | Bankruptcy Court for the: | Northern    | District of Illinois |
|                        |                           |             | (State)              |
| Case number (If known) |                           |             |                      |

| Check if this is an |
|---------------------|
| amended filing      |

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: Summarize Your Assets   |   |
|---|---|
|   | Your assets<br>Value of what you own      |
| . Schedule A/B: Property (Official Form 106A/B)   | \$0.00                                    |
| 1a. Copy line 55, Total real estate, from Schedule A/B  | Ψ0.00                                     |
| 1b. Copy line 62, Total personal property, from Schedule A/B  | \$5,955.00                                |
| 1c. Copy line 63, Total of all property on Schedule A/B   | \$5,955.00                                |
| Part 2: Summarize Your Liabilities  |   |
|   | <b>Your liabilities</b><br>Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$4,555.00                                |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)   | \$16,000.00                               |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F  |   |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F   | \$7,840.00                                |
| Your total liabilities  | \$28,395.00                               |
| Part 3: Summarize Your Income and Expenses  |   |
| Canimariao Foai Intolino ana Exponesso  |   |
| 4. Schedule I: Your Income (Official Form 106I)   | \$1,345.57                                |
| Copy your combined monthly income from line 12 of Schedule I  |   |
|   |   |
| 5. Schedule J: Your Expenses (Official Form 106J)   | \$1,070.00                                |

Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 9 of 65

| Deb         | tor 1 Lamare  |   | Stewart                                | Case number (if known)  |           |  |  |  |
|-------------|---|---|--|---|-----------|--|--|--|
| Part        | First Name 4: Answer These Q  | Middle Name uestions for Administrat                    | Last Name<br>tive and Statistical Rece | ords  |           |  |  |  |
| 6. <b>A</b> |   | tcy under Chapters 7, 11, o                             |  | mit this form to the court with your other sc   | chedules. |  |  |  |
|             | family, or household p  Your debts are not p  | rily consumer debts. Consuurpose. 11 U.S.C. § 101(8). F | Fill out lines 8-10 for statistica     | I by an individual primarily for a personal, al purposes. 28 U.S.C. § 159. this part of the form. Check this box and su | ubmit     |  |  |  |
|             | S. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.  \$2,357.41 |   |  |   |           |  |  |  |
| 9.          |   | cial categories of claims from                          | om Part 4, line 6 of Schedu            | le E/F:<br>Total claim  |           |  |  |  |
|             | 9a. Domestic support ob   | ligations (Copy line 6a.)                               |  | \$16,000.00   |           |  |  |  |
|             | 9b. Taxes and certain oth   | er debts you owe the govern                             | ment. (Copy line 6b.)                  | \$0.00  |           |  |  |  |
|             | 9c. Claims for death or pe  | ersonal injury while you were                           | intoxicated. (Copy line 6c.)           | \$0.00  |           |  |  |  |
|             | 9d. Student loans. (Copy  | line 6f.)   |  | \$0.00  |           |  |  |  |
|             | 9e. Obligations arising ou priority claims. (Copy line  | t of a separation agreement of 6g.)                     | or divorce that you did not rep        | port as \$0.00  |           |  |  |  |
|             | 9f. Debts to pension or p   | rofit-sharing plans, and other                          | similar debts. (Copy line 6h.)         | \$0.00  |           |  |  |  |

\$16,000.00

9g. Total. Add lines 9a through 9f.

Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 10 of 65

| Fill in this                           | inform                    | nation to identify your c  | ase:  |                      |   |  |   |  |
|--|---------------------------|--|---|----------------------|---|--|---|--|
| Dobtor 1                               |                           | Lomoro   |   |                      | Ctowart   |  |   |  |
| Debtor 1                               |                           | Lamare<br>First Name   | Middle N  | ame                  | Stewart<br>Last Name                                  |  |   |  |
| Debtor 2                               | l:\                       | <del></del>  |   |                      |   |  |   |  |
| (Spouse, if fi                         | iing)                     | First Name   | Middle N  | ame                  | Last Name   |  |   |  |
| United Sta                             | ates Ba                   | nkruptcy Court for the:  | Northern  |                      | District of Illinois (State)                          |  |   |  |
| Case num<br>(If known)                 | nber                      |  |   |                      |   |  |   |  |
| Officia                                | al Fo                     | orm 106A/B   |   |                      |   |  |   | Check if this is an amended filing   |
| Sche                                   | dule                      | A/B: Prope   | erty  |                      |   |  |   | 12/1   |
| category v<br>responsibl<br>write your | where<br>le for s<br>name | you think it fits best. Is supplying correct infor and case number (if k | Be as complete a<br>mation. If more s<br>known). Answer e | nd a<br>pace<br>very | ccurate as possible. If tw<br>is needed, attach a sep | vo married people<br>parate sheet to thi | han one category, list the<br>are filing together, both a<br>s form. On the top of any a<br>re an Interest In | are equally  |
| 1. Do you                              | ı own                     | or have any legal or ed  | quitable interest i                                       | n an                 | y residence, building, la                             | nd, or similar prop                      | perty?  |  |
|  | No. G                     | io to Part 2   |   |                      | -   |  | •   |  |
| i ii                                   | Yes. V                    | Where is the property?   |   |                      |   |  |   |  |
| 1.1                                    | Street                    | address, if available, or  | other description   | Wh                   | at is the property? Chec<br>Single-family home        | k all that apply.                        | the amount of any secu  | claims or exemptions. Put ured claims on Schedule D: nims Secured by Property. |
|  | Olicei                    | address, ii available, or  | other description   |                      | Duplex or multi-unit build                            | _  | Current value of the  | Current value of the   |
|  |                           |  |   |                      | Condominium or coopera  Manufactured or mobile h      |  | entire property?  | portion you own?   |
|  |                           |  |   |                      | Land  | iome                                     |   |  |
|  | Numb                      | per Street   |   |                      | Investment property                                   |  | Describe the nature of interest (such as fee s  |  |
|  | City                      | State  | Zip Code  |                      | Timeshare<br>Other                                    |  | the entireties, or a life   |  |
|  | Oity                      | State  | Zip Gode  |                      | o has an interest in the                              | property? Check                          | Check if this is co   | ommunity property  |
|  |                           |  |   | one                  | Debtor 1 only   |  |   |  |
|  |                           |  |   |                      | Debtor 2 only   |  |   |  |
|  |                           |  |   |                      | Debtor 1 and Debtor 2 or                              | nly                                      |   |  |
|  |                           |  |   |                      | At least one of the debtor                            | s and another                            |   |  |
|  |                           |  |   |                      | ner information you wish<br>perty identification num  |  | item, such as local   |  |
| If you                                 | own o                     | r have more than one, li   | ist here:   |                      |   |  |   |  |
|  |                           |  |   | Wh                   | at is the property? Chec                              | k all that apply.                        | Do not deduct secured the amount of any secu  | claims or exemptions. Put<br>ired claims on <i>Schedule D:</i>                 |
| 1.2                                    | Street                    | address, if available, or  | other description   |                      | Single-family home                                    | :  |   | aims Secured by Property.  |
|  |                           |  |   |                      | Duplex or multi-unit build Condominium or coopera     | J  | Current value of the  | Current value of the   |
|  |                           |  |   |                      | Manufactured or mobile h                              |  | entire property?  | portion you own?   |
|  |                           |  |   |                      | Land  |  |   |  |
|  | Numb                      | per Street   |   |                      | Investment property                                   |  | Describe the nature of interest (such as fee s  |  |
|  | <u> </u>                  | Chaha  | Zin Onda  |                      | Timeshare<br>Other                                    |  | the entireties, or a life   |  |
|  | City                      | State  | Zip Code  |                      | Other   |  |   |  |
|  |                           |  |   | Wh<br>one            | o has an interest in the                              | property? Check                          | Check if this is co<br>(see instructions)   | ommunity property  |
|  |                           |  |   |                      | Debtor 1 only   |  | _   |  |
|  |                           |  |   |                      | Debtor 2 only   |  |   |  |
|  |                           |  |   |                      | Debtor 1 and Debtor 2 or                              | -  |   |  |
|  |                           |  |   |                      | At least one of the debtor                            |  |   |  |
|  |                           |  |   |                      | ner information you wish<br>perty identification num  |  | item, such as local   |  |

# Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 11 of 65

| Debtor 1    | Lamare<br>First Name  | Middle Name                               | Stewart<br>Last Name   | Case numbe       | r (if known)   |   |
|-------------|---|---|--|------------------|--|---|
| 1.3         | eet address, if available, or ot                              | v   | What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home   | apply.           | the amount of any secu   | claims or exemptions. Put red claims on <i>Schedule D: ims Secured by Property.</i> Current value of the portion you own? |
| Nur<br>City | mber Street  State  | Zip Code                                  | Land Investment property Timeshare Other   | _                | Describe the nature or interest (such as fee s the entireties, or a life | imple, tenancy by   |
|             |   | []<br>[]<br>[]<br>[]                      | Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and the information you wish to add property identification number: | nother           | Check if this is co<br>(see instructions)  such as local                 | mmunity property  |
|             | the dollar value of the po<br>we attached for Part 1. Wr      | rtion you own for a<br>ite that number he | III of your entries from Part 1, inclere.  | uding any entrie | s for pages  |   |
|             | Describe Your Vehicle   |   | in any vehicles, whether they are  | registered or no | ot? Include any vehicles   |   |
| you own t   | that someone else drives. If yans, trucks, tractors, sport ut | ou lease a vehicle, a                     | also report it on Schedule G: Executo  | -                | -  |   |
| 3.1         | Model:<br>Year:   | Cadillac<br>CTS<br>2004                   | Who has an interest in the proone.  Debtor 1 only  | perty? Check     | the amount of any secu   | claims or exemptions. Put<br>ured claims on <i>Schedule D:</i><br>aims Secured by Property.                               |
|             | Approximate mileage: Other information: 2004 Cadillac CTS     | 152000                                    | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this is community   |                  | Current value of the entire property?<br>\$4575.00                       | Current value of the portion you own?<br>\$4575.00  |
| 3.2         | Make<br>Model:<br>Year:                                       |   | who has an interest in the proone.  Debtor 1 only  | perty? Check     | the amount of any secu   | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.  |
|             | Approximate mileage: Other information:                       |   | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this is community instructions)   |                  | Current value of the entire property?                                    | Current value of the portion you own?   |

# Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 12 of 65

| nor i | Lamare<br>First Name   | Middle Name            | Stewart<br>Last Name  |  | er (if known)  |   |
|-------|--|------------------------|---|--|--|---|
|       |  |                        |   |  |  |   |
| 3.3   | Make<br>Model:   |                        | Who has an interest in the pro<br>one.  | perty? Check   |  | claims or exemptions. Pured claims on <i>Schedule</i> in  |
|       | Year:  |                        | Debtor 1 only   |  |  | nims Secured by Property  |
|       | Approximate mileage:   |                        |   |  |  | , , ,   |
|       | , pp.o.m.a.c m.aago.   | ·                      | Debtor 2 only   |  | Current value of the   | Current value of the  |
|       | Other information:   |                        | Debtor 1 and Debtor 2 only  |  | entire property?   | portion you own?  |
|       |  |                        | At least one of the debtors ar  | nd another   |  |   |
|       |  |                        | Check if this is community  | y property (see  |  |   |
|       |  |                        | instructions)   |  |  |   |
| 3.4   | Make   |                        | Who has an interest in the pro  | perty? Check   |  | claims or exemptions. Pu  |
|       | Model:   |                        | one.  |  |  | red claims on Schedule  |
|       | Year:  |                        | Debtor 1 only   |  | Creditors Who Have Cla   | ims Secured by Property   |
|       | Approximate mileage:   |                        | Debtor 2 only   |  | Current value of the   | Current value of the  |
|       | Other information:   |                        | Debtor 1 and Debtor 2 only  |  | entire property?   | portion you own?  |
|       |  |                        | At least one of the debtors ar  | nd another   |  |   |
|       |  |                        | Check if this is community  | y property (see  |  |   |
|       |  |                        | instructions)   |  |  |   |
|       | mples: Boats, trailers, motors   | •                      | er recreational vehicles, other ve<br>t, fishing vessels, snowmobiles, mo   | •  |  |   |
| Exa   | nples: Boats, trailers, motors<br>No<br>Yes  | •                      |   | otorcycle accessori  | Do not deduct secured the amount of any secu   | claims or exemptions. Pured claims on <i>Schedule</i> .   |
| Exar  | nples: Boats, trailers, motors<br>No<br>Yes<br>Make<br>Model:<br>Year:   | •                      | t, fishing vessels, snowmobiles, mo   | otorcycle accessori  | Do not deduct secured the amount of any secu   | •   |
| Exar  | nples: Boats, trailers, motors<br>No<br>Yes<br>Make<br>Model:  | •                      | who has an interest in the pro  | otorcycle accessori  | Do not deduct secured the amount of any secu   | red claims on <i>Schedule</i> .   |
| Exar  | nples: Boats, trailers, motors<br>No<br>Yes<br>Make<br>Model:<br>Year:   | •                      | who has an interest in the proone.  | otorcycle accessori  | Do not deduct secured the amount of any secu Creditors Who Have Cla  | red claims on Schedule in image of the secured by Property  |
| Exar  | nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:   | •                      | who has an interest in the proone.  Debtor 1 only Debtor 2 only   | otorcycle accessori  | Do not deduct secured the amount of any secu Creditors Who Have Cla  | red claims on Schedule and schedule of the Current value of the   |
| Exar  | nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:   | •                      | who has an interest in the proone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only  | otorcycle accessori  | Do not deduct secured the amount of any secu Creditors Who Have Cla  | red claims on Schedule in ims Secured by Property  Current value of the   |
| 4.1   | nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:   | •                      | Who has an interest in the proone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors are instructions)  | otorcycle accessori<br>operty? Check<br>and another<br>y property (see                                   | Do not deduct secured the amount of any secu Creditors Who Have Cla  | red claims on Schedule and schedule of the Current value of the   |
| 4.1   | nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:                                     | •                      | Who has an interest in the proone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar   | otorcycle accessori<br>operty? Check<br>and another<br>y property (see                                   | Do not deduct secured the amount of any secu Creditors Who Have Cla  Current value of the entire property?  Do not deduct secured the amount of any secu   | red claims on Schedule aims Secured by Property  Current value of the portion you own?  claims or exemptions. Pured claims on Schedule  |
| 4.1   | nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:                                     | •                      | Who has an interest in the proone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this is community instructions) Who has an interest in the pro   | otorcycle accessori<br>operty? Check<br>and another<br>y property (see                                   | Do not deduct secured the amount of any secu Creditors Who Have Cla  Current value of the entire property?  Do not deduct secured the amount of any secu   | red claims on Schedule aims Secured by Property  Current value of the portion you own?  claims or exemptions. Pu  |
| 4.1   | Make Model: Other information:  Make Model: Make Model: Make Model: Model: Model: Model: Model: Model:                                     | •                      | Who has an interest in the proone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors are instructions)  Who has an interest in the proone.  | otorcycle accessori<br>operty? Check<br>and another<br>y property (see                                   | Do not deduct secured the amount of any secu Creditors Who Have Clate Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Clate Creditors Who Have Clate Creditors Who Have Clate Creditors Control of the secured the amount of any secu Creditors Who Have Clate Control of the secured the secur | red claims on Schedule sims Secured by Property  Current value of the portion you own?  claims or exemptions. Pured claims on Schedule sims Secured by Property                       |
| 4.1   | mples: Boats, trailers, motors  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year: Approximate mileage: | •                      | Who has an interest in the proone.  Debtor 1 only Debtor 2 only At least one of the debtors an Check if this is community instructions)  Who has an interest in the proone. Debtor 1 only Debtor 2 only   | otorcycle accessori<br>operty? Check<br>and another<br>y property (see                                   | Do not deduct secured the amount of any secu Creditors Who Have Cla  Current value of the entire property?  Do not deduct secured the amount of any secu   | red claims on Schedule aims Secured by Property  Current value of the portion you own?  claims or exemptions. Pured claims on Schedule  |
| 4.1   | Make Model: Approximate mileage: Other information:  Make Model: Year: Approximate mileage: Other information:                             | •                      | Who has an interest in the proone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an Check if this is community instructions)  Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only  | operty? Check and another y property (see  | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the  | red claims on Schedule sims Secured by Property  Current value of the portion you own?  claims or exemptions. Pured claims on Schedule sims Secured by Property  Current value of the |
| 4.1   | mples: Boats, trailers, motors  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year: Approximate mileage: | •                      | Who has an interest in the proone.  Debtor 1 only Debtor 2 only At least one of the debtors ar instructions)  Who has an interest in the proone. Debtor 1 and Debtor 2 only At least one of the debtors ar instructions)  Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors ar | operty? Check and another y property (see  | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the  | red claims on Schedule sims Secured by Property  Current value of the portion you own?  claims or exemptions. Pured claims on Schedule sims Secured by Property  Current value of the |
| 4.1   | mples: Boats, trailers, motors  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year: Approximate mileage: | •                      | Who has an interest in the proone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an Check if this is community instructions)  Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only  | operty? Check and another y property (see  | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the  | red claims on Schedule ims Secured by Propert Current value of the portion you own?  claims or exemptions. Fired claims on Schedule ims Secured by Propert Current value of the       |
| 4.1   | Make Model: Year: Approximate mileage: Other information:  Make Model: Year: Approximate mileage: Other information:                       | s, personal watercraft | Who has an interest in the proone.  Debtor 1 only Debtor 2 only At least one of the debtors ar instructions)  Who has an interest in the proone. Debtor 1 and Debtor 2 only At least one of the debtors ar instructions)  Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors ar | otorcycle accessorion perty? Check and another y property (see operty? Check and another y property (see | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property?   | red claims on Schedule ims Secured by Property  Current value of the portion you own?  claims or exemptions. Pured claims on Schedule ims Secured by Property  Current value of the   |

#### Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 13 of 65

Debtor 1 Lamare Stewart Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used Furniture \$400.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Misc. Electronics \$150.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... Misc. Men's Clothing \$340.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$890.00 for Part 3. Write that number here .....

#### Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 14 of 65

Stewart Debtor 1 Lamare Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: <u>\$4</u>90.00 Netspend 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

# Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 15 of 65

| Deb | tor 1 Lamare<br>First Name  | Middle Name  | Stewart<br>Last Name                             | Case number (if known)                     |  |
|-----|---|--|--|--|--|
| 20. | Government and corp<br>Negotiable instruments                         | orate bonds and other negotia<br>include personal checks, cashiers                     | ble and non-negotiable<br>checks, promissory not | es, and money orders.                      |  |
|     | Non-negotiable instrum  No  Yes. Give specific information about them | ents are those you cannot transfe  | er to someone by signing                         | or delivering them.                        |  |
|     | шеш   |  |  |  |  |
|     |   |  |  |  |  |
|     |   |  |  |  |  |
| 21. | Examples: Interests in II   |  | ), thrift savings accounts                       | , or other pension or profit-sharing plans |  |
|     | ✓ No  Yes. List each  | Type of account:   | Institution name:                                |  |  |
|     | account separately.   | 401(k) or similar plan:  |  |  |  |
|     | . ,   | Pension plan:  |  |  |  |
|     |   | IRA:   |  |  |  |
|     |   | Retirement account:  |  |  |  |
|     |   | Keogh:   |  |  |  |
|     |   | Additional account:  |  |  |  |
|     |   | Additional account:  |  |  |  |
| 22. |   | prepayments<br>d deposits you have made so that<br>with landlords, prepaid rent, publi |  |  |  |
|     | Yes   | Electric:  |  |  |  |
|     | _   | Gas:   |  |  |  |
|     |   | Heating oil:   |  |  |  |
|     |   | Security deposit on rental unit:   |  |  |  |
|     |   | Prepaid rent:  |  |  |  |
|     |   | Telephone:   |  |  |  |
|     |   | Water:   |  |  |  |
|     |   | Rented furniture:  |  |  |  |
|     |   | Other:   |  |  |  |
| 23. | Annuities (A contract for   | or a periodic payment of money to  | you, either for life or for                      | a number of years)                         |  |
|     | ✓ No  Yes   | Issuer name and description:   |  |  |  |
|     |   |  |  |  |  |
|     |   |  |  |  |  |
|     |   |  |  |  |  |

# Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 16 of 65

| First Name   |   |   |  |
|--|---|---|--|
|  | Middle Name Last Name n education IRA, in an account in a qualified ABLE program, or unde   | er a qualified state tuition program.   |  |
|  | 530(b)(1), 529A(b), and 529(b)(1).  | o. a 4 o. o. o. o. o. p. o.g. u   |  |
| ✓ No<br>Yes  | Institution name and description. Separately file the records of any interest   | sts.11 U.S.C. § 521(c):   |  |
|  |   |   |  |
|  |   |   |  |
|  |   |   |  |
|  |   | 1), and rights or powers  |  |
| <b>✓</b> No  |   |   |  |
| Yes. Desc  | ribe  |   |  |
|  |   |   |  |
|  |   | ements  |  |
| <b>✓</b> No  |   |   |  |
| Yes. Desc  | ribe  |   |  |
|  |   |   |  |
|  |   | licenses, professional licenses   |  |
|  | 3,7   | , , , , , , , , , , , , , , , , , ,   |  |
| Yes. Desc  | ribe  |   |  |
|  |   |   |  |
|  |   |   |  |
| ey or proper   | rty owed to you?  |   | Current value of the portion you own? Do not deduct secured claims or exemptions.  |
| ey or proper   |   |   | portion you own? Do not deduct secured   |
| 「ax refunds ov<br>✓ No   | wed to you  | Estad   | portion you own?  Do not deduct secured claims or exemptions.  |
| ✓ No Yes. Give s   |   | Federal:  | portion you own? Do not deduct secured claims or exemptions.   |
| Fax refunds ov No Yes. Give s abou you a   | wed to you specific information   | Federal:<br>State:  | portion you own?  Do not deduct secured claims or exemptions.  |
| ✓ No Yes. Give s abou you a and t  | specific information t them, including whether already filed the returns the tax years  |   | portion you own? Do not deduct secured claims or exemptions.   |
| Family suppor  | specific information t them, including whether already filed the returns the tax years  | State:<br>Local:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00   |
| Family suppor  | specific information t them, including whether already filed the returns the tax years  | State:<br>Local:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00   |
| No Yes. Give s abou you a and t  Family suppor Examples: Past  | specific information t them, including whether already filed the returns the tax years  | State:<br>Local:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00   |
| No Yes. Give s abou you a and t  Family suppor Examples: Past  | specific information t them, including whether already filed the returns the tax years  t due or lump sum alimony, spousal support, child support, maintenance,   | State:  Local:  divorce settlement, property settlemen  | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00   |
| No Yes. Give s abou you a and t  Family suppor Examples: Past  | specific information t them, including whether already filed the returns the tax years  t due or lump sum alimony, spousal support, child support, maintenance,   | State: Local: divorce settlement, property settlemen Alimony:   | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  tt  \$0.00   |
| No Yes. Give s abou you a and t  Family suppor Examples: Past  | specific information t them, including whether already filed the returns the tax years  t due or lump sum alimony, spousal support, child support, maintenance,   | State: Local: divorce settlement, property settlemen Alimony: Maintenance:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00   |
| No Yes. Give s abou you a and t  Family suppor Examples: Past  | specific information t them, including whether already filed the returns the tax years  t due or lump sum alimony, spousal support, child support, maintenance,   | State: Local:  divorce settlement, property settlement  Alimony:  Maintenance:  Support:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00   |
| No Yes. Give s abou you a and t  Family suppor Examples: Past  No Yes. Give s                                    | specific information t them, including whether already filed the returns the tax years   t due or lump sum alimony, spousal support, child support, maintenance, specific information   | State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 |
| No Yes. Give s abou you a and t  Family suppor  Examples: Past  No Yes. Give s  Other amount  Examples: Unp Soci | specific information t them, including whether already filed the returns the tax years  t due or lump sum alimony, spousal support, child support, maintenance, specific information  | State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 |
| No Yes. Give s abou you a and t  Family suppor Examples: Past  No Yes. Give s                                    | specific information t them, including whether already filed the returns the tax years  t due or lump sum alimony, spousal support, child support, maintenance, specific information  s someone owes you aid wages, disability insurance payments, disability benefits, sick pay, vaca ial Security benefits; unpaid loans you made to someone else | State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 |
|  | V No Yes  Trusts, equitaexercisable for Yes. Description Yes. No  | No  | Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):  Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit  No Yes. Describe  Patents, copyrights, trademarks, trade secrets, and other intellectual property  Examples: Internet domain names, websites, proceeds from royalties and licensing agreements  No Yes. Describe  Licenses, franchises, and other general intangibles  Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses   |

# Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 17 of 65

| Deb <sup>1</sup> | tor 1 Lamare   |                             | Stewart  | Case number (if known)                        |  |
|------------------|--|-----------------------------|--|---|--|
|                  | First Name   | Middle Nam                  | e Last Name  |   |  |
| 31.              | Interests in insurance Examples: Health, disab           |                             | ealth savings account (HSA); credit, h                               | omeowner's, or renter's insurance             |  |
|                  | No Yes. Name the insure of each policy and               |                             | Company name:  | Beneficiary:                                  | Surrender or refund value:   |
| 32.              |  | y of a living trust, expect | n someone who has died<br>t proceeds from a life insurance polic     | y, or are currently entitled to receive       |  |
| 33.              | Claims against third p                                   |                             | you have filed a lawsuit or made<br>surance claims, or rights to sue | a demand for payment                          |  |
| 34.              | Other contingent and to set off claims  No Yes. Describe | I unliquidated claims o     | of every nature, including counterd                                  | claims of the debtor and rights               |  |
| 35.              | Any financial assets y                                   | ou did not already list     |  |   |  |
|                  | Yes. Describe  |                             |  |   |  |
| 36.              |  | -                           | om Part 4, including any entries fo                                  |   | \$490.00   |
| Part             | _  |                             |  | nterest In. List any real estate in Pa        | rt 1.  |
| 37.              | Do you own or have a                                     | ny legal or equitable in    | nterest in any business-related pr                                   | operty?                                       |  |
|                  | No. Go to Part 6. Yes. Go to line 38.                    |                             |  |   | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38.              | Accounts receivable                                      | or commissions you al       | ready earned   |   |  |
|                  | ✓ No  Yes. Describe                                      |                             |  |   |  |
| 39.              | Office equipment, fur Examples: Business-rel             |                             | re, modems, printers, copiers, fax ma                                | achines, rugs, telephones, desks, chairs, ele | ctronic devices  |
|                  | ✓ No Yes. Describe                                       |                             |  |   |  |

# Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 18 of 65

| Deb      | tor 1 Lamare                | Stewart   | Case number (if known)     |  |
|----------|-----------------------------|---|----------------------------|--|
|          | First Name                  | Middle Name Last Name   |                            |  |
| 40.      | Machinery, fixtures, equ    | ipment, supplies you use in business, and tools of your trade   | •                          |  |
|          | <b>✓</b> No                 |   |                            |  |
|          | Yes. Describe               |   |                            |  |
|          | _                           |   |                            |  |
|          |                             |   |                            |  |
| 41.      | Inventory                   |   |                            |  |
|          | <b>✓</b> No                 |   |                            |  |
|          | Yes. Describe               |   |                            |  |
|          |                             |   |                            |  |
|          |                             | <del></del>   |                            |  |
| 42.      | Interests in partnerships   | or joint ventures   |                            |  |
|          | ✓ No                        |   |                            |  |
|          | Yes. Give specific          | Name of entity:   | % of ownership:            |  |
|          | information about           |   |                            |  |
|          | them                        |   |                            |  |
|          |                             |   |                            |  |
|          |                             |   |                            |  |
| 43.      | Customer lists, mailing lis | sts, or other compilations  |                            |  |
|          | <b>✓</b> No                 |   |                            |  |
|          |                             | ude personally identifiable information (as defined in 11 U.S.C. §  | 101(41A))?                 |  |
|          | ш .                         |   | , ,,                       |  |
|          | ☐ No                        |   |                            |  |
|          | Yes. Describe               | Э   |                            |  |
|          |                             |   |                            |  |
| 44.      | Any business-related pro    | operty you did not already list   |                            |  |
|          | <b>✓</b> No                 |   |                            |  |
|          | Yes. Give specific          |   |                            |  |
|          | information                 |   |                            |  |
|          |                             |   |                            |  |
|          |                             |   |                            |  |
|          |                             |   |                            | <del>-</del>                               |
|          |                             |   |                            |  |
|          |                             |   |                            |  |
|          |                             |   |                            |  |
| 45 A     | dd the dollar value of all  | of your entries from Part 5 including any entries for names y   | ou have attached           |  |
|          |                             | of your entries from Part 5, including any entries for pages you have a summer to be some some some some some some some som |                            |  |
| <u> </u> |                             |   |                            |  |
| Part     | If you own or have an int   | m- and Commercial Fishing-Related Property You O terest in farmland, list it in Part 1.                                     | wn or Have an Interest In. |  |
| 46.      | Do you own or have any      | legal or equitable interest in any farm- or commercial fishin   | ng-related property?       |  |
|          | No. Go to Part 7.           |   |                            | Current value of the                       |
|          | Yes. Go to line 47.         |   |                            | portion you own?                           |
|          | Tes. do to line 47.         |   |                            | Do not deduct secured claims or exemptions |
| 47.      | Farm animals                |   |                            |  |
|          | Examples: Livestock, poul   | ltry, farm-raised fish  |                            |  |
|          | <b>√</b> No                 |   |                            |  |
|          | Yes. Describe               |   |                            |  |
|          | L 100. 2000 1150            |   |                            |  |
|          |                             |   |                            |  |

# Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 19 of 65

| Debto          | or 1 Lamare<br>First Name | Middle Name                                    | Stewart<br>Last Name  | Case number (if known)       |                     |
|----------------|---------------------------|--|-----------------------|------------------------------|---------------------|
| 48.            |                           | growing or harvested                           |                       |                              |                     |
|                | <b>✓</b> No               |  |                       |                              |                     |
|                | Yes. Desc                 | ribe   |                       |                              |                     |
|                |                           |  |                       |                              |                     |
| 49.            | Farm and fish             | ling equipment, implements, machinery, fix     | tures, and tools of t | trade                        |                     |
|                | ✓ No                      | nile a   |                       |                              |                     |
|                | Yes. Desc                 | nbe  |                       |                              |                     |
| 50             | Farm and fish             | ing supplies, chemicals, and feed              |                       |                              |                     |
| 50.            | No No                     | ing supplies, chemicals, and leed              |                       |                              |                     |
|                | Yes. Desc                 | ribe   |                       |                              |                     |
|                |                           |  |                       |                              |                     |
| 51.            | Any farm- and             | d commercial fishing-related property you d    | iid not already list  |                              |                     |
|                | <b>✓</b> No               |  |                       |                              |                     |
|                | Yes. Desc                 | ribe   |                       |                              |                     |
|                |                           |  |                       |                              |                     |
|                |                           | alue of all of your entries from Part 6, inclu |                       |                              |                     |
| or Pai         | rt o. write tha           | t number here                                  | ,                     |                              |                     |
|                |                           |  |                       |                              |                     |
| Part 7         | Describe                  | e All Property You Own or Have an Into         | erest in That You     | ı Did Not List Above         |                     |
| 53.            | Do you have o             | other property of any kind you did not alread  |                       |                              |                     |
|                |                           | son tickets, country club membership           |                       |                              |                     |
|                | ✓ No  Yes. Give           | specific                                       |                       |                              |                     |
|                | informatio                |  |                       |                              |                     |
|                |                           |  |                       |                              |                     |
| 54 Ad          | ld the dellar v           | alue of all of your entries from Part 7. Write | that number here      |                              | •                   |
| 54. Au         | iu tile uollar v          | alue of all of your entries from Part 7. Write | that number here      |                              |                     |
|                |                           |  |                       |                              |                     |
|                |                           |  |                       |                              |                     |
|                |                           |  |                       |                              |                     |
| Part 8         | List the                  | Totals of Each Part of this Form               |                       |                              |                     |
| 55. <b>P</b>   | art 1: Total re           | eal estate, line 2                             |                       | <b>&gt;</b>                  |                     |
| 56. <b>p</b> : | art 2 total vel           | nicles. line 5                                 | <b>0.4575.00</b>      |                              |                     |
|                |                           | rsonal and household items, line 15            | \$4575.00             |                              |                     |
|                | _                         | ancial assets, line 36                         | \$890.00              |                              |                     |
|                |                           | usiness-related property, line 45              | \$490.00              |                              |                     |
|                |                           | rm- and fishing-related property, line 52      |                       |                              |                     |
|                |                           | ther property not listed, line 54              |                       |                              |                     |
|                |                           | property. Add lines 56 through 61              | ФЕОЕЕ ОО              |                              | , <b>\$</b> E055 00 |
|                |                           | Ç  | \$5955.00             | Copy personal property total | + \$5955.00         |
|                |                           |  |                       |                              | \$5955.00           |
| 63. <b>Tc</b>  | otal of all prop          | perty on Schedule A/B. Add line 55 + line 62   |                       |                              |                     |

Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 20 of 65

| Fill i                                     | n this infori  | nation to identify your cas   | se:  |  |  |  |
|--|--|---|--|--|--|--|
| Deb  | tor 1  | Lamare  |  | Stewart  |  |  |
| Deb  | tor 2  | First Name  | Middle Name  | Last Name  |  |  |
| (Spot                                      | use, if filing)  | First Name  | Middle Name  | Last Name  |  |  |
| Unit                                       | ed States B  | ankruptcy Court for the:  | Northern   | District of Illinois (State)   |  |  |
| Case<br>(If knd                            | e number<br>own)   |   |  | (State)  |  |  |
| )<br>Of                                    | ficial   | Form 106C   |  |  |  | Check if this is a amended filing  |
| 3c   | hedul  | e C: The Prope  | erty You Claim   | as Exempt  |  | 12/1   |
|  | a specif   | ic dollar amount as e   | xempt. Alternatively,  | ou may claim the full  | fair market value of   | a claim. One way of doing so is to<br>the property being exempted up to<br>tts to receive certain benefits, and  |
| he a<br>ax-c<br>unde<br>our                | exempt reer a law to exemption a law to exemption to large the large transfer and the large | etirement funds—may<br>hat limits the exemption would be limited to<br>tify the Property You<br>of exemptions are you care claiming state and fed   | y be unlimited in dolla<br>ion to a particular doll<br>to the applicable statut<br>Claim as Exempt<br>claiming? Check one only,<br>deral nonbankruptcy exe   | r amount. However, if ar amount and the value tory amount.  even if your spouse is filing mptions. 11 U.S.C. § 5220  | you claim an exempue of the property is  | otion of 100% of fair market value<br>determined to exceed that amoun  |
| he a<br>ax-c<br>unde<br>our                | exempt rer a law to exemption a  | etirement funds—may hat limits the exemption would be limited to tify the Property You of exemptions are you of are claiming state and fec- are claiming federal exemptions   | y be unlimited in dollar ion to a particular dollar to the applicable statute.  Claim as Exempt elaiming? Check one only, deral nonbankruptcy exemptions. 11 U.S.C. § 522(   | r amount. However, if ar amount and the value tory amount.  even if your spouse is filing mptions. 11 U.S.C. § 5220  | you claim an exempue of the property is a with you.  |  |
| he a<br>ax-c<br>unde<br>your<br>Part<br>1. | exempt rer a law to exemption a  | etirement funds—may hat limits the exemption would be limited to tify the Property You of exemptions are you of are claiming state and fec- are claiming federal exemptions   | y be unlimited in dollar on to a particular dollar of the applicable status.  Claim as Exempt  claiming? Check one only, deral nonbankruptcy exemptions. 11 U.S.C. § 522(fulle A/B that you claim and Current value of   | r amount. However, if ar amount and the value ory amount.  even if your spouse is filing mptions. 11 U.S.C. § 522(b)(2)  s exempt, fill in the inform  Amount of the exempt Check only one box for                                     | you claim an exempue of the property is gwith you.  (b)(3)  nation below.                                      | otion of 100% of fair market value determined to exceed that amount amount of the state of the s |
| he a<br>ax-c<br>unde<br>your<br>Part<br>1. | exempt rer a law to exemption a  | etirement funds—may hat limits the exemption would be limited to tify the Property You of exemptions are you are claiming state and fedure claiming federal exemptions are claiming federal exemptions of the property a hedule A/B that lists this                                       | y be unlimited in dollar on to a particular dollar on to a particular dollar of the applicable status.  Claim as Exempt  Claiming? Check one only, deral nonbankruptcy exemptions. 11 U.S.C. § 522(dule A/B that you claim a limit of the portion you own  Copy the value fro Schedule A/B           | r amount. However, if ar amount and the value ory amount.  even if your spouse is filing mptions. 11 U.S.C. § 522(b)(2)  s exempt, fill in the inform  Amount of the exempt Check only one box for                                     | you claim an exempue of the property is gwith you.  (b)(3)  nation below.                                      | determined to exceed that amoun  |
| he a<br>ax-c<br>unde<br>your<br>Part<br>1. | exempt rer a law to exemption a law to exempt a law to exem | etirement funds—may hat limits the exemption would be limited to tify the Property You of exemptions are you are claiming state and fed are claiming federal exemptions of the property you list on Schedeription of the property a hedule A/B that lists this                            | y be unlimited in dollar on to a particular dollar on to a particular dollar of the applicable statut.  Claim as Exempt  Claiming? Check one only, deral nonbankruptcy exemptions. 11 U.S.C. § 5220  Jule A/B that you claim a claim a claim of the portion you own  Copy the value from             | r amount. However, if ar amount and the value ory amount.  even if your spouse is filling mptions. 11 U.S.C. § 522(b)(2)  s exempt, fill in the inform  Amount of the exempt Check only one box form                                   | you claim an exempue of the property is gwith you.  (b)(3)  nation below.                                      | determined to exceed that amount   |
| he a<br>ax-c<br>unde<br>your<br>Part<br>1. | exempt rer a law to exemption a law to exempt a law to exem | etirement funds—may hat limits the exemption would be limited to tify the Property You of exemptions are you of are claiming state and fector claiming federal exemptions of the property you list on Schedeription of the property a hedule A/B that lists this  Men's Clothing          | y be unlimited in dollar on to a particular dollar on to a particular dollar of the applicable status.  Claim as Exempt  Claiming? Check one only, deral nonbankruptcy exemptions. 11 U.S.C. § 522(dule A/B that you claim a limit of the portion you own  Copy the value fro Schedule A/B           | r amount. However, if ar amount and the value ory amount.  even if your spouse is filing mptions. 11 U.S.C. § 522(b)(2)  s exempt, fill in the inform  Amount of the exempt Check only one box form                                    | you claim an exempue of the property is a with you.  (b)(3)  nation below.  otion you claim or each exemption. | determined to exceed that amount   |
| he a<br>ax-c<br>unde<br>your<br>Part<br>1. | exempt rer a law to exemption a law to exempt reresearch a law to exempt rer | etirement funds—may hat limits the exemption would be limited to tify the Property You of exemptions are you of are claiming state and fector claiming federal exemptions of the property you list on Schedeription of the property a hedule A/B that lists this  Men's Clothing  A/B: 11 | y be unlimited in dollar on to a particular dollar on to a particular dollar of the applicable statut.  Claim as Exempt  Claiming? Check one only, deral nonbankruptcy exemptions. 11 U.S.C. § 522(dule A/B that you claim a limit of the portion you own  Copy the value fro Schedule A/B  \$340.00 | even if your spouse is filing mptions. 11 U.S.C. § 522(b)(2) s exempt, fill in the inform  Amount of the exempt Check only one box form  100% of fair mar applicable statut  | you claim an exempue of the property is a with you.  (b)(3)  nation below.  otion you claim or each exemption. | determined to exceed that amount   |
| he a<br>ax-c<br>unde<br>your<br>Part<br>1. | exempt rer a law to exemption a law to exempt rerespond a law to exempt representation a law to  | etirement funds—may hat limits the exemption would be limited to tify the Property You of exemptions are you of are claiming state and fector claiming federal exemptions of the property you list on Schedeription of the property a hedule A/B that lists this  Men's Clothing  A/B: 11 | y be unlimited in dollar on to a particular dollar on to a particular dollar of the applicable status.  Claim as Exempt  Claiming? Check one only, deral nonbankruptcy exemptions. 11 U.S.C. § 522(dule A/B that you claim a limit of the portion you own  Copy the value fro Schedule A/B           | r amount. However, if ar amount and the value or amount.  even if your spouse is filing mptions. 11 U.S.C. § 522(b)(2)  s exempt, fill in the inform  Amount of the exempt Check only one box form  100% of fair mar applicable statut | you claim an exempue of the property is a with you.  (b)(3)  nation below.  otion you claim or each exemption. | Specific laws that allow exemption  735 ILCS 5/12-1001(a)  |

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

## Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 21 of 65

| Debtor 1 Lamare   | \$            | Stewart Case number <i>(if known)</i>  |  |
|---|---------------|--|--|
| First Name  | Middle Name L | ast Name   |  |
| Part 2: Additional Page   |               |  |  |
| Brief description of the property at line on Schedule A/B that lists this property    |               | Amount of the exemption you claim  Check only one box for each exemption.        | Specific laws that allow exemption           |
| Brief description:  Misc. Electronics  Line from Schedule A/B: 07                     | \$150.00      | \$150.00  100% of fair market value, up to any applicable statutory limit        | 735 ILCS 5/12-1001(b)                        |
| Brief description: Other financial account, Netspend Line from Schedule A/B: 17       | \$490.00      | \$490.00  100% of fair market value, up to any applicable statutory limit        | 735 ILCS 5/12-1001(b)                        |
| Brief description:  Cadillac CTS, 2004, 2004 Cadillac CTS  Line from Schedule A/B: 03 | \$4,575.00    | \$20.00; \$0.00  100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) |

Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 22 of 65

|  |  | DC   | rage 22 or  | 03  |   |                                   |
|--|--|--|---|---|---|-----------------------------------|
| Fill in this infor                       | mation to identify your ca   | se:  |   |   |   |                                   |
| Debtor 1                                 | Lamare   |  | Stewart   |   |   |                                   |
|  | First Name   | Middle Name  | Last Name   |   |   |                                   |
| Debtor 2<br>(Spouse, if filing)          | First Name   | Middle Name  | Last Name   |   |   |                                   |
| United States F                          |  | Northern   | District of Illinois  |   |   |                                   |
|  | camaptoy court for are.  | TTOTATOTT  | (State)   |   |   |                                   |
| Case number (If known)                   |  |  |   |   |   |                                   |
| Official                                 | Form 106D  |  |   | 1   |   | Check if this is an mended filing |
| Schedu                                   | le D: Credito  | ors Who Ha   | ve Claims Secure  | ed by Prop  | erty  | 12/15                             |
| more space is name and case  1. Do any c | needed, copy the Addition in the control of the con | ecured by your proper<br>it this form to the court | e are filing together, both are equipper the entries, and attach it to the ty?  with your other schedules. You have | his form. On the top  | of any additional pag                                 |                                   |
| Part 1: List                             | All Secured Claims   |  |   |   |   |                                   |
| separate                                 | •  | nan one creditor has a par                         | cured claim, list the creditor<br>ticular claim, list the other creditors<br>order according to the creditor's      | Column A  Amount of claim  Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| Creditor's                               | Imerton Rd Suite 200   | 2004 Cadillac CTS                                  | that secures the claim: , the claim is: Check all that apply.   | \$4,555.00  | \$4,575.00  | \$0.00                            |
|  | State ZIP Code res the debt? Check one.  | Unliquidated Disputed Nature of lien. Check a      | all that apply.   |   |   |                                   |
| Deb At le and Che                        |  | car loan)  | ight to offset)   |   |   |                                   |

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$4,555.00

# Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 23 of 65

| Fill in t  | his inforr   | mation to identify your c   | case:  |   |  |  |   |   |
|--|--|---|--|---|--|--|---|---|
| Debtor   | 1  | Lamare  |  | Stewart   |  |  |   |   |
| Debtor   | . 2  | First Name  | Middle Name  | Last Name   |  |  |   |   |
| (Spouse,   |  | First Name  | Middle Name  | Last Name   |  |  |   |   |
| United   | States B   | ankruptcy Court for the:  | Northern   | District of Illinois (State)  |  |  |   |   |
| Case n   | umber<br>)   |   |  | (   |  |  |   |   |
| Offic  | ial Fo   | orm 106E/F  |  |   |  | Chec   | k if this is an                               | amended filing                              |
| Sch  | nedu   | ıle E/F: Cre  | editors Who  | Have Unsecure   | d Claims   |  |   | 12/1  |
| other p<br>Form 1<br>claims<br>the ent<br>known)<br>Part 1 | arty to a 06A/B) a that are ries in th . : List A o any cr | any executory contracts<br>and on Schedule G: Exe<br>listed in Schedule D: C<br>he boxes on the left. At<br>All of Your PRIORIT | s or unexpired leases the<br>ecutory Contracts and L<br>Creditors Who Hold Clai          |   | executory contract<br>i). Do not include a<br>ce is needed, copy | s on <i>Schedul</i><br>any creditors<br>the Part you | e A/B: Prope<br>with partial<br>need, fill it | erty (Official<br>ly secured<br>out, number |
| lis<br>A   | ist all of<br>sted, iden<br>s much a<br>ontinuati          | ntify what type of claim it<br>as possible, list the claims<br>on Page of Part 1. If mor  | is. If a claim has both pri<br>s in alphabetical order acc<br>re than one creditor holds | s more than one priority unsecured clain<br>ority and nonpriority amounts, list that c<br>ording to the creditor's name. If you ha<br>a particular claim, list the other creditors<br>s for this form in the instruction bookle | laim here and show<br>ve more than two po<br>s in Part 3.        | both priority a                                      | and nonpriori                                 | ty amounts.                                 |
|  |  | ,   | ,  |   | ,  | Total  | Priority                                      | Nonpriority                                 |
| 2.1  | Illinois De  | epartment of Human & Fa   | amily Services   |   |  | <b>claim</b><br>\$16,000,00                          | <b>amount</b> \$16,000.00                     | \$0.00                                      |
|  | Priority C   | reditor's Name  | arriny convices  | Last 4 digits of account number   | n/a  | <u>\$10,000.0</u> 0                                  | Ψ10,000.00                                    | Ψ0.00                                       |
|  | 509 S. 6<br>Number   | Street  |  | When was the debt incurred?   |  |  |   |   |
|  |  |   |  | As of the date you file, the claim is apply.  | : Check all that   |  |   |   |
|  | Springfie  | ld Illinois   | 62701  | Contingent  |  |  |   |   |
|  | City   | State   | Zip Code   | Unliquidated  |  |  |   |   |
|  |  | urred the debt? Check of tor 1 only   | one.   | Disputed  |  |  |   |   |
|  | Debt   | tor 2 only  |  | Type of PRIORITY unsecured claim  | :  |  |   |   |
|  | Deb1   | tor 1 and Debtor 2 only   |  | Domestic support obligations  |  |  |   |   |
|  | At le  | ast one of the debtors an   | nd another   | Taxes and certain other debts you government  | u owe the  |  |   |   |
|  | Che  | ck if this claim relates  | to a community debt  | Claims for death or personal injur  | y while you were   |  |   |   |
|  | ls the cl  | aim subject to offset?  |  | intoxicated Other. Specify  |  |  |   |   |
|  | ✓ No<br>Yes  |   |  |   |  |  |   |   |
|  |  | , Jessica   |  | Last 4 digits of account number   |  | \$0.00   | \$0.00  | \$0.00                                      |
|  |  | creditor's Name<br>artment of Human Service   | es   | When was the debt incurred?   | n/a  |  |   |   |
|  | Number   | Street  |  | As of the date you file, the claim is   | : Check all that   |  |   |   |
|  | <u>3910 Og</u>   | gden Ave  |  | apply.  |  |  |   |   |
|  | Chicago  |   | 60623  | Contingent  |  |  |   |   |
|  | City<br><b>Who inc</b>                                     | State urred the debt? Check   | Zip Code<br>one  | Unliquidated  |  |  |   |   |
|  |  | tor 1 only  | <b>U.I.G.</b>  | Disputed  | _  |  |   |   |
|  | Debt   | tor 2 only  |  | Type of PRIORITY unsecured claim  Domestic support obligations  | i.   |  |   |   |
|  | Debt   | tor 1 and Debtor 2 only   |  | ✓ Domestic support obligations  Taxes and certain other debts you   | ı owe the  |  |   |   |
|  | At le  | ast one of the debtors an   | nd another   | government  | 2 0 10 0 0 0   |  |   |   |
|  | _  | ck if this claim relates aim subject to offset?   | to a community debt  | Claims for death or personal injurintoxicated   | y while you were   |  |   |   |
|  | ✓ No   | a subject to onset:   |  | Other. Specify  | ·  |  |   |   |

### Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 24 of 65

Debtor 1 Lamare Stewart Case number (if known) Middle Name First Name Last Name Part 1: Your PRIORITY Unsecured Claims - Continuation Page Total **Priority** Nonpriority After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. claim amount amount 2.3 Payne, Jocylen \$0.00 \$0.00 \$0.00 Last 4 digits of account number \_ Priority Creditor's Name c/o Illinois Department of Human Services When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that 3910 Ogden Ave Contingent 60623 Chicago Illinois Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only **✓** Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the At least one of the debtors and another government Claims for death or personal injury while you were Check if this claim relates to a community debt intoxicated Is the claim subject to offset? Other. Specify \_\_\_ Notice Only **✓** No

Yes

#### Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 25 of 65

Debtor 1 Lamare Stewart Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 Americash \$725.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 555 Torrence Avenue Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60409 Calumet City Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: V Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_ Due Is the claim subject to offset? Yes CHASE CARD 4.2 \$709.00 Last 4 digits of account number 1723 Nonpriority Creditor's Name PO BOX 15298 When was the debt incurred? 4/1/2015 Number As of the date you file, the claim is: Check all that apply. Contingent WILMINGTON Delaware 19850 Unliquidated City Zip Code State Disputed Who incurred the debt? Check one. Debtor 1 only **|** Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_\_ CreditCard Is the claim subject to offset? **✓** No City of Chicago Parking \$5,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 121 N. LaSalle St # 107A Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60602 Chicago Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ Due Is the claim subject to offset? **✓** No Yes

### Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 26 of 65

 Debtor 1 First Name
 Lamare
 Stewart
 Case number (if known)

 Last Name
 Last Name

| Part : | Your NONPRIORITY Unsecured Claims - Continuat   | ion Page   |             |
|--------|---|--|-------------|
|        | After listing any entries on this page, number them beginning   | with 4.5, followed by 4.6, and so forth.   | Total claim |
| 4.4    | CONVERGENT OUTSOURCING Nonpriority Creditor's Name Po Box 9004 Number Street  | Last 4 digits of account number 5675 When was the debt incurred? 12/1/2016  As of the date you file, the claim is: Check all that apply.   | \$957.00    |
|        | Renton Washington 98057 City State Zip Code Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offset?  ✓ No  Yes  | Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  001 Collection; Collecting for Other. Specify ORIGINAL CREDITOR: DIRECTV   |             |
| 4.5    | IL DEPT OF HEALTHCARE  Nonpriority Creditor's Name 509 S 6TH ST  Number Street  SPRINGFIELD Illinois 62701  City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?  Yes   | Last 4 digits of account number 6043 When was the debt incurred? 1/1/2016  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify InstallmentLoan | \$149.00    |
| 4.6    | Speedy Cash Nonpriority Creditor's Name 1931 N. Mannheim Rd Number Street  Melrose Park Illinois 60160 City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset?  Yes | Last 4 digits of account number  When was the debt incurred?   | \$300.00    |

Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 27 of 65

| Debtor 1  | Lamare      |  |   | Stewart              | Case number <i>(if known)</i>                              |  |  |
|---|-------------|--|---|----------------------|--|--|--|
|   | First Name  |  | Middle Name   | Last Name            |  |  |  |
| art 3:  | List Others | s to Be Notified   | About a Debt Tha  | t You Already Listed |  |  |  |
| <ul> <li>Use this page only if you have others to be notified about<br/>collection agency is trying to collect from you for a deb<br/>collection agency here. Similarly, if you have more than</li> </ul> |             | ebt you owe to some<br>an one creditor for ar<br>o be notified for any | y, for a debt that you already listed in Parts 1 or 2. For example, if a eone else, list the original creditor in Parts 1 or 2, then list the any of the debts that you listed in Parts 1 or 2, list the additional y debts in Parts 1 or 2, do not fill out or submit this page. |                      |  |  |  |
| Nam<br>111  |             | N BLVD S-400   |   | Line 4.3             | of (Check Part 1: Creditors with Priority Unsecured Claims |  |  |
| Nur   | nber Stree  | t  |   |                      | one):  Part 2: Creditors with Nonpriority Unsecured Claims |  |  |
| CHI   | CAGO        | Illinois   | 60604   | Last 4 digits o      | of account number  |  |  |
| City  | ř           | State  | Zip Code  |                      |  |  |  |

Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 28 of 65

Debtor 1 Lamare Stewart Case number (if known)

| First Nar                | me Middle Name Last Name  |     |  |
|--------------------------|---|-----|--|
| Part 4: Add th           | ne Amounts for Each Type of Unsecured Claim   |     |  |
| 6. Total the a           | mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.   |     | statistical reporting purposes only. 28 U.S.C. §159.  Total claims |
|                          |   |     |  |
| Total claims from Part 1 | 6a. Domestic support obligations.   | 6a. |  |
| IIOIII FAIL I            | 6b. Taxes and certain other debts you owe the government  | 6b. | \$0.00   |
|                          | 6c. Claims for death or personal injury while you were intoxicated  | 6c. | \$0.00   |
|                          | 6d. Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$0.00<br>L  |
|                          | 6e. Total. Add lines 6a through 6d.   |     | \$16,000.00  |
|                          |   |     | Total claims   |
| Total claims from Part 2 | 6f. Student loans   | 6f. | \$0.00   |
|                          | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00   |
|                          | 6h. Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$0.00   |
|                          | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.                              | 6i. | \$7,840.00   |
|                          | 6j. Total. Add lines 6f through 6i.   | 6j. | \$7,840.00   |

Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 29 of 65

| Fill in this infor     | mation to identify your c | ase:        |                      |  |
|------------------------|---------------------------|-------------|----------------------|--|
| Debtor 1               | Lamare                    |             | Stewart              |  |
|                        | First Name                | Middle Name | Last Name            |  |
| Debtor 2               |                           |             |                      |  |
| (Spouse, if filing)    | First Name                | Middle Name | Last Name            |  |
| United States E        | Bankruptcy Court for the: | Northern    | District of Illinois |  |
| Case number (If known) |                           |             | (State)              |  |

#### Official Form 106G

#### Check if this is an amended filing

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

### Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 30 of 65

|                                 |                                 | טט   | cument Page  | 30 01 05   |
|---------------------------------|---------------------------------|--|--|--|
| Fill in this info               | ormation to identify your c     | ase:   |  |  |
| Debtor 1                        | Lamare                          |  | Stewart  |  |
|                                 | First Name                      | Middle Name  | Last Name  |  |
| Debtor 2<br>(Spouse, if filing) | First Name                      | Middle Name  | Last Name  | <del></del>  |
| United States                   | Bankruptcy Court for the:       | Northern   | District of Illinois   |  |
| Case number                     |                                 |  | (State)  |  |
| (If known)                      |                                 |  |  |  |
|                                 |                                 |  |  | Check if this is an amended filing   |
| Official                        | Form 106H                       |  |  | · ·  |
|                                 |                                 |  |  |  |
| <u>Schedu</u>                   | le H: Your Cod                  | lebtors  |  | 12/15  |
| 1. Do you h                     | S                               | u are filing a joint case, do                            | ·  | •  |
|                                 |                                 | lived in a community prop<br>ico, Puerto Rico, Texas, Wa | •  | (Community property states and territories include Arizona, California, .) |
|                                 | . Go to line 3.                 |  | and Proceedings of the Process of th |  |
|                                 | s. Dia your spouse, forme<br>No | r spouse, or legal equival                               | ent live with you at the til   | TIE?   |
|                                 |                                 | y state or territory did you                             | live?  | Fill in the name and current address of that person.                       |
|                                 | Name of your spouse, f          | ormer spouse, or legal equi                              | valent   |  |
|                                 | Number Street                   |  |  |  |
|                                 | City                            | State  | Zip Cod  | le   |
| 3. In Colum                     | nn 1, list all of your codeb    |  |  | your spouse is filing with you. List the person shown in line 2            |

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 31 of 65

| Fill in this informa  | tion to identify   | your case:   |                   |                    |                   |  |
|---|--|--|-------------------|--------------------|-------------------|--|
| Debtor 1 Lam  |  |  | Stewar            |                    | _                 |  |
|   | : Name   | Middle Name  | Last Na           | ame                | Che               | ck if this is:   |
| Debtor 2<br>(Spouse, if filing) First   | Name   | Middle Name  | Last Na           | ama                | - I n             | An amended filing  |
|   |  |  |                   |                    |                   | A supplement showing post-petition chapter 1   |
| United States Bankı the:  | ruptcy Court for   | Northern   | District of Illin | nois<br>tate)      |                   | expenses as of the following date:   |
| Case number   |  |  | (0)               | iai <del>e</del> ) |                   |  |
| (If known)  |  |  |                   |                    | i                 | MM / DD / YYYY   |
| Official For  | m 106l   |  |                   |                    |                   |  |
| Schedule I  | : Your In  | come   |                   |                    |                   | 12/1   |
| information about<br>spouse. If more sp<br>number (if known)  | your spouse. I<br>pace is needed   | f you are separated and<br>, attach a separate shed<br>y question.   | d your spous      | e is not filing    | with you, do      | r spouse is living with you, include<br>not include information about your<br>onal pages, write your name and case |
| Fill in your emp  | loyment  |  | Debtor 1          |                    |                   | Debtor 2   |
| information.  | •  |  |                   |                    |                   | _  |
| If you have more  | •  | Employment status  | <b>✓</b> Employ   |                    |                   | Employed   |
| attach a separate information abou  | . •  |  | Not Em            | nployed            |                   | Not Employed   |
| employers.  |  | Occupation   |                   |                    |                   |  |
| Include part time<br>self-employed w  |  | Employer's name  | Action K-9        | Security, Inc.     |                   |  |
| Occupation may  | include student  | Employer's address   |                   | Lake Street        |                   |  |
| or homemaker, it  |  |  | Number Stre       | eet                |                   | Number Street  |
|   |  |  |                   |                    |                   | ·  |
|   |  |  | Chicago<br>City   | Illinois<br>State  | 60612<br>Zip Code | City State Zip Code  |
|   |  |  | 2 years 1 m       |                    | <b>p</b>          | on, on <u>Lip</u> 6000   |
|   |  | How long employed there?   | L your I II       |                    |                   |  |
|   |  |  |                   |                    |                   |  |
| Part 2: Give De   | staile About M   | lonthly Income   |                   |                    |                   |  |
| Part 2: Give De   | etails About M   | Ionthly Income   |                   |                    |                   |  |
| Estimate monthly spouse unless you  | y income as of t<br>are separated.   | he date you file this form   | -                 |                    | -                 | write \$0 in the space. Include your non-filing  |
| Estimate monthly spouse unless you  | y income as of t<br>are separated.<br>filing spouse have   | he date you file this form   | -                 |                    | -                 | r that person on the lines below. If you need  |
| Estimate monthly spouse unless you If you or your non-i   | y income as of t<br>are separated.<br>filing spouse have   | he date you file this form   | -                 | information for    | -                 |  |
| Estimate monthly spouse unless you If you or your non-imore space, attack   | y income as of t<br>are separated.<br>filing spouse have<br>h a separate shee<br>gross wages, sala | he date you file this form   | combine the i     | information for    | all employers fo  | r that person on the lines below. If you need  |
| Estimate monthly spouse unless you If you or your non-more space, attack  2. List monthly generated deductions.) If be. | y income as of t<br>are separated.<br>filing spouse have<br>h a separate shee<br>gross wages, sala | he date you file this form e more than one employer, et to this form.  ary, and commissions (befor calculate what the monthly of | combine the i     | information for    | all employers fo  | r that person on the lines below. If you need  |

# Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 32 of 65

| Debtor                  |  | Stewart           | Case numbe             | er <i>(if</i>                     |                         |
|-------------------------|--|-------------------|------------------------|-----------------------------------|-------------------------|
|                         | First Name Middle Name L   | ast Name          | known) For Debtor 1    | For Debtor 2 or non-filing spouse |                         |
| Copy                    | line 4 here  | <b>→</b> 4.       | \$2,277.60             |                                   |                         |
|                         | ıll payroll deductions:  |                   |                        |                                   |                         |
| 5a. <b>T</b>            | ax, Medicare, and Social Security deductions   | 5a.               | \$293.41               |                                   |                         |
| 5b. <b>N</b>            | Mandatory contributions for retirement plans   | 5b.               | \$0.00                 |                                   |                         |
| 5c. <b>V</b>            | oluntary contributions for retirement plans  | 5c.               | \$0.00                 |                                   |                         |
| 5d. <b>F</b>            | Required repayments of retirement fund loans   | 5d.               | \$0.00                 |                                   |                         |
| 5e. <b>l</b> ı          | nsurance   | 5e.               | \$0.00                 |                                   |                         |
| 5f. <b>D</b>            | omestic support obligations  | 5f.               | \$628.66               |                                   |                         |
| 5g. <b>l</b>            | Jnion dues   | 5g.               | \$0.00                 |                                   |                         |
| 5h. <b>C</b>            | Other deductions. Specify: Processing fee  | 5h. +             | \$9.97 +               | -                                 |                         |
| 6. <b>Add t</b><br>+5h. | the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f   | + 5g 6.           | \$932.04               |                                   |                         |
| 7. Calcu                | ulate total monthly take-home pay. Subtract line 6 from line   | 4. 7.             | \$1,345.57             |                                   |                         |
| 8. List a               | all other income regularly received:   |                   |                        |                                   |                         |
| b                       | let income from rental property and from operating a usiness, profession, or farm  |                   |                        |                                   |                         |
| g                       | ttach a statement for each property and business showing pross receipts, ordinary and necessary business expenses, and the total monthly net income.   | 8a.               | \$0.00                 |                                   |                         |
| 8b. <b>I</b>            | nterest and dividends  | 8b.               | \$0.00                 |                                   |                         |
|                         | amily support payments that you, a non-filing spouse, or a lependent regularly receive   | а                 |                        |                                   |                         |
|                         | nclude alimony, spousal support, child support, maintenance, livorce settlement, and property settlement.  | 8c.               | \$0.00                 |                                   |                         |
| 8d. <b>l</b>            | Jnemployment compensation  | 8d.               | \$0.00                 |                                   |                         |
|                         | ocial Security   | 8e.               | \$0.00                 |                                   |                         |
| Ir<br>ca<br>u<br>h      | ther government assistance that you regularly receive<br>actude cash assistance and the value (if known) of any non-<br>ash assistance that you receive, such as food stamps (benefits<br>ander the Supplemental Nutrition Assistance Program) or<br>ousing subsidies<br>pecify: | 8f.               | \$0.00                 |                                   |                         |
| 8g. <b>F</b>            | Pension or retirement income   | 8g.               | \$0.00                 |                                   |                         |
| 8h. <b>(</b>            | Other monthly income. Specify:   | 8h. +             | \$0.00 +               | -                                 |                         |
| 9. <b>Add</b> a         | all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g +   | 8h. 9.            | \$0.00                 |                                   |                         |
|                         | ulate monthly income. Add line 7 + line 9.<br>the entries in line 10 for Debtor 1 and Debtor 2 or non-filing sp  | 10.<br>oouse      | \$1,345.57             | =                                 | \$1,345.57              |
| Inclu<br>friend         | te all other regular contributions to the expenses that you de contributions from an unmarried partner, members of your ds or relatives.  ot include any amounts already included in lines 2-10 or amou  | household, your o | lependents, your roomr |                                   |                         |
| Spec                    | ify:   |                   |                        | 11.                               | + \$0.00                |
|                         | the amount in the last column of line 10 to the amount in that amount on the Summary of Schedules and Statistical Sun  |                   |                        |                                   | \$1,345.57              |
|                         | you expect an increase or decrease within the year after y   | ou file this form | ?                      |                                   | Combined monthly income |
|                         | Yes. Explain:  |                   |                        |                                   |                         |

### Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main

|   |   | D0   | cument Page 33                                    | 3 01 65   |             |                              |
|---|---|--|---|---|-------------|------------------------------|
| Fill in this infor                                    | mation to identify you  | ur case:   |   |   |             |                              |
| Debtor 1  | Lamare  |  | Stewart   |   |             |                              |
| D. I  | First Name  | Middle Name  | Last Name   | Check if this is:   |             |                              |
| Debtor 2<br>(Spouse, if filing)                       | First Name  | Middle Name  | Last Name   | An amended filir  | ıg          |                              |
| United States E                                       | Sankruptcy Court for the  | he: Northern   | District of Illinois (State)                      | A supplement sl expenses as of t                                |             | petition chapter 13<br>date: |
| Case number<br>(If known)                             |   |  |   |   | <del></del> |                              |
| Official  | Form 106  | I  |   |   |             |                              |
| Official  | FOITH TOOL  | <u>)</u>   |   |   |             |                              |
| Schedul   | e J: Your Ex  | (penses  |   |   |             | 12/15                        |
| Part 1: Desc<br>1. Is this a joi<br>No. Go<br>Yes. Do | o to line 2  pes Debtor 2 live in a  No  Yes. Debtor 2 must e dependents? | hold  a separate household?  st file Official Forms 106J-2, Ex       | <u> </u>  |   |             |                              |
| Debtor 2.   | ebior r and   | each dependent   | Or Dependent's relationsh<br>Debtor 1 or Debtor 2 | nip to Dependent's age  | with you?   | endent live                  |
|   |   | No<br>Yes  |   |   |             |                              |
| Part 2: Estin   | nate Your Ongoir  | ng Monthly Expenses  |   |   |             |                              |
| -   | of a date after the ba  |  | -   | s a supplement in a Chapter 1<br>heck the box at the top of the |             |                              |
|   | •   | n-cash government assistan<br>ed it on Sc <i>hedule I: Your Inco</i> | -   |   |             | Your expenses                |
|   | or home ownership<br>or the ground or lot. 4                              | expenses for your residence  | . Include first mortgage payme                    | ents and  | 4.          | \$400.00                     |
| If not incl   | uded in line 4:   |  |   |   |             |                              |
| 4a. Real es   | state taxes   |  |   |   | 4a          | \$0.00                       |

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

\$0.00

\$0.00

\$0.00

\$0.00

4a

4b.

4c.

4d.

### Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 34 of 65

Debtor 1 Lamare Stewart Case number (if known)
First Name Middle Name Last Name

| First Name   | iviludie Name Last Name   |     |               |
|--|---|-----|---------------|
|  |   |     | Your expenses |
| 5. Additional mortgage paymen  | nts for your residence, such as home equity loans                           | 5.  | \$0.00        |
| 6. Utilities:  |   |     |               |
| 6a. Electricity, heat, natural gas                                     | 3   | 6a. | \$0.00        |
| 6b. Water, sewer, garbage coll   | ection  | 6b. | \$0.00        |
| 6c. Telephone, cell phone, Int   | ernet, satellite, and cable services  | 6c. | \$100.00      |
| 6d. Other. Specify:  |   | 6d  | \$0.00        |
| 7. Food and housekeeping sup   | plies   | 7.  | \$300.00      |
| 8. Childcare and children's edu  | acation costs   | 8.  | \$0.00        |
| 9. Clothing, laundry, and dry cl                                       | eaning  | 9.  | \$30.00       |
| 10. Personal care products and   | d services  | 10. | \$25.00       |
| 11. Medical and dental expens  | es  | 11. | \$0.00        |
| 12. <b>Transportation.</b> Include gas.<br>Do not include car payments | maintenance, bus or train fare.   | 12. | \$161.00      |
| 13. Entertainment, clubs, recre  | ation, newspapers, magazines, and books                                     | 13. | \$0.00        |
| 14. Charitable contributions ar  | d religious donations   | 14. | \$0.00        |
| 15. <b>Insurance.</b> Do not include insurance dedu                    | ucted from your pay or included in lines 4 or 20.                           |     |               |
| 15a. Life insurance  |   | 15a | \$0.00        |
| 15b. Health insurance  |   | 15b | \$0.00        |
| 15c. Vehicle insurance   |   | 15c | \$54.00       |
| 15d. Other insurance. Specify:   |   | 15d | \$0.00        |
| 16. Taxes. Do not include taxes of                                     | deducted from your pay or included in lines 4 or 20.                        |     |               |
| Specify:   |   | 16  | \$0.00        |
| 17. Installment or lease payme   | nts:  | 10  |               |
| 17a. Car payments for Vehicle  |   | 17a | \$0.00        |
| 17b. Car payments for Vehicle  | 2   | 17b | \$0.00        |
| 17c. Other. Specify:   |   | 17c | \$0.00        |
|  |   | 17d | \$0.00        |
|  | maintenance, and support that you did not report as deducted from           |     | \$0.00        |
|  | e I, Your Income (Official Form 106I).                                      | 18. |               |
| Specify:   | o support others who do not live with you.                                  | 10  | <b>#0.00</b>  |
|  | es not included in lines 4 or 5 of this form or on Schedule I: Your Income. | 19. | \$0.00        |
| 20a. Mortgages on other prop   |   | 20a | \$0.00        |
| 20b. Real estate taxes.  |   | 20b | \$0.00        |
| 20c. Property, homeowner's,  | or renter's insurance   | 20c | \$0.00        |
| 20d. Maintenance, repair, and  |   | 20d | \$0.00        |
| 20e. Homeowner's association   |   | 20e | \$0.00        |
|  |   | 200 | Ψ0.00         |

## Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 35 of 65

| Debtor 1   |              |                     |                       | Stewart                       | Case number (if known) |            |            |
|--|--------------|---------------------|-----------------------|-------------------------------|------------------------|------------|------------|
|  | First Name   |                     | Middle Name           | Last Name                     |                        |            |            |
| 21.Other   | r. Specify:  |                     |                       |                               |                        | 21         | \$0.00     |
| 22 Colo  | uloto vour   | monthly expenses.   |                       |                               |                        |            |            |
|  | -            |                     |                       | \$1,070.00                    |                        |            |            |
| 22a. Add lines 4 through 21.  22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 |              |                     |                       |                               |                        |            | \$0.00     |
|  |              |                     | \$1,070.00            |                               |                        |            |            |
|  |              |                     | is your monthly expe  | enses.                        |                        | 22.        |            |
|  | -            | monthly net income  |                       |                               |                        |            |            |
| 23a. (   | Copy line 12 | 2 (your combined mo | onthly income) from S | schedule I.                   |                        | 23a        | \$1,345.57 |
| 23b. Copy your monthly expenses from line 22 above.  |              |                     |                       |                               | 23b                    | \$1,070.00 |            |
|  |              |                     | from your monthly in  | come.                         |                        |            | \$275.57   |
| The result is your monthly net income.   |              |                     | come.                 |                               |                        | 23c        |            |
| mort   |              |                     |                       | ean within the year or do you |                        |            |            |
| _  | Ex           | plain here:         |                       |                               |                        |            |            |
|  |              |                     |                       |                               |                        |            |            |

### Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 36 of 65

| Fill in this infor     | mation to identify your c | ase:        |                      |  |
|------------------------|---------------------------|-------------|----------------------|--|
| Debtor 1               | Lamare                    |             | Stewart              |  |
|                        | First Name                | Middle Name | Last Name            |  |
| Debtor 2               |                           |             |                      |  |
| (Spouse, if filing)    | First Name                | Middle Name | Last Name            |  |
| United States E        | Sankruptcy Court for the: | Northern    | District of Illinois |  |
|                        |                           |             | (State)              |  |
| Case number (If known) |                           |             |                      |  |

#### Official Form 106Dec

#### Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below  |   |
|-----|--|---|
|     | Did you pay or agree to pay someone who is NOT an attorney to I  | help you fill out bankruptcy forms?   |
|     | ✓ No   |   |
|     | Yes. Name of person  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|     |  |   |
|     |  |   |
|     | Under penalty of perjury, I declare that I have read the summary | and schedules filed with this declaration and   |
|     | that they are true and correct.                                  |   |
| X   | /s/ Lamare Stewart   | ×   |
|     | Signature of Debtor 1  | Signature of Debtor 2   |
|     | Date 3/3/2017  | Date  |
|     | MM/DD/YYYY   | MM/DD/YYYY  |

Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 37 of 65

| Fill ir         | n this info              | ormation to identify your                     | case:                         |  |                      |          |          |                                   |
|-----------------|--------------------------|---|-------------------------------|--|----------------------|----------|----------|-----------------------------------|
| Debt            | tor 1                    | Lamare<br>First Name                          | Middle                        | Stewart<br>Name Last Nan   | ne.                  |          |          |                                   |
| Debt<br>(Spou   | tor 2<br>use, if filing) |   | Middle                        |  |                      |          |          |                                   |
|                 |                          | Bankruptcy Court for the:                     |                               | District of Illing   |                      |          |          |                                   |
| Case<br>(If kno | e numbei<br>own)         | r   |                               | (Sta   | tte)                 |          |          |                                   |
| Of              | ficial                   | Form 107                                      |                               |  |                      | _        |          | Check if this is a amended filing |
|                 |                          |   | al Affairs f                  | or Individuals   | Filing for           | Bankru   | ptcv     | 12/1:                             |
| infor<br>num    | mation.<br>ber (if k     | . If more space is need mown). Answer every c | ed, attach a sep<br>Juestion. | arried people are filing<br>arate sheet to this form                               | n. On the top of     |          |          |                                   |
| Part            | GIN                      | ve Details About Your                         | Marital Status                | and Where You Lived  | Before               |          |          |                                   |
| 1.              |                          | is your current marital st                    | atus?                         |  |                      |          |          |                                   |
|                 | ш                        | larried<br>ot married                         |                               |  |                      |          |          |                                   |
| 2.              | During                   | g the last 3 years, have y                    | ou lived anywher              | e other than where you l   | ive now?             |          |          |                                   |
|                 | ✓ No                     |   | ou lived in the las           | t 3 years. Do not include  | where you live no    | w.       |          |                                   |
|                 | De                       | ebtor 1:                                      |                               | Dates Debtor 1 lived there   | Debtor 2:            |          |          | Dates Debtor 2 lived there        |
|                 |                          |   |                               |  | Same as I            | Debtor 1 |          | Same as Debtor 1                  |
|                 | Ni                       | umber Street                                  |                               | From   | Number Street        | :        |          | From                              |
|                 | Ci                       | ity State                                     | Zip Code                      |  | City                 | State    | Zip Code |                                   |
|                 |                          |   |                               |  | Same as [            | Debtor 1 |          | Same as Debtor 1                  |
|                 | Ni                       | umber Street                                  |                               | From   | Number Street        |          |          | From<br>To                        |
|                 | Ci                       | ity State                                     | Zip Code                      |  | City                 | State    | Zip Code |                                   |
| 3.              | and territ               | <i>itories</i> include Arizona, Calif         | ornia, Idaho, Louis           | oouse or legal equivalent<br>siana, Nevada, New Mexico<br>Codebtors (Official Form | o, Puerto Rico, Texa |          |          | mmunity property states           |

Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 38 of 65

| Debt      | tor 1                             | Lamare  | Stew  | rart   | Case number (if known)                               |              |   |
|-----------|-----------------------------------|---|---|--|--|--------------|---|
|           |                                   | First Name Middle   | Name Last I   | Name   |  |              |   |
| Part      | 2:                                | Explain the Sources of Your Inc   | ome   |  |  |              |   |
|           | Fill i                            | you have any income from employmenthe total amount of income you receivities. If you are filing a joint case and yo No  Yes. Fill in the details.   | ed from all jobs and all bu   | isinesses, including part-   | time   | calendar yea | rs?   |
|           |                                   |   | Debtor 1  |  | Debtor 2   |              |   |
|           |                                   |   | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions<br>exclusions)                                  | Sources of inc<br>and Check all that a               |              | Gross income<br>(before deductions and<br>exclusions)                     |
|           |                                   | om January 1 of current year until<br>e date you filed for bankruptcy:  | Wages, commissions, bonuses, tips Operating a business                                | \$2125.76  | Wages, commission bonuses, to Operating business     | ips          |   |
|           |                                   | or last calendar year: anuary 1 to December 31, 2016 )  YYYY  | Wages, commissions, bonuses, tips Operating a business                                | \$23000.00   | ── Wages, commissic bonuses, t ☐─ Operating business | ips          |   |
|           |                                   | or the calendar year before that: anuary 1 to December 31, 2015 ) YYYY  | Wages, commissions, bonuses, tips Operating a business                                | \$30000.00   | Wages, commissic bonuses, t Operating business       | ips          |   |
| <br> <br> | Inclu<br>publ<br>filing<br>List ( | you receive any other income during de income regardless of whether that in ic benefit payments; pensions; rental inc a joint case and you have income that greach source and the gross income from No  Yes. Fill in the details. | come is taxable. Example<br>come; interest; dividends;<br>you received together, list | s of other income are alir<br>money collected from lav<br>it only once under Debto | vsuits; royalties; and gan<br>or 1.                  | -            |   |
|           |                                   |   | Debtor 1  |  | Debtor 2   |              |   |
|           |                                   |   | Sources of income<br>Describe below.  | Gross income freeach source (before deduction and exclusions)                      | Describe below                                       |              | Gross income from<br>each source<br>(before deductions and<br>exclusions) |
|           |                                   | rom January 1 of current year until<br>ne date you filed for bankruptcy:  |   |  |  |              |   |
|           |                                   | or last calendar year: lanuary 1 to December 31, 2016 ) YYYY  |   |  |  |              |   |
|           |                                   | or the calendar year before that:<br>lanuary 1 to December 31, 2015 )<br>YYYY   |   |  |  |              |   |
|           |                                   |   |   |  | <u></u>  |              |   |

Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 39 of 65

Stewart Debtor 1 Lamare \_\_ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other

# Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 40 of 65

| or 1                 | Lamare                                  |                                     |  | Sto                                       | ewart                                       | Case number                                  | (if known)  |
|----------------------|---|-------------------------------------|--|---|---|--|---|
|                      | First Name                              |                                     | Middle Name  | Las                                       | st Name                                     |  |   |
| nsic<br>corp<br>ager | ders include your<br>porations of which | relatives; an you are a for a busir | any general partners<br>an officer, director,<br>ness you operate as | s; relatives of any<br>person in control, | general partners; par<br>or owner of 20% or | tnerships of which y<br>more of their voting | who was an insider? you are a general partner; g securities; and any managing r domestic support obligations, |
| ✓                    | No                                      |                                     |  |   |   |  |   |
| Ш                    | Yes. List all pay                       | ments to a                          | an insider.  | Dates of payment                          | Total amount paid                           | Amount you still owe                         | Reason for this payment   |
|                      | Insider's Name                          |                                     |  |   |   |  |   |
|                      | Number Street                           |                                     |  |   |   |  |   |
| _                    | City                                    | State                               | Zip Code   |   |   |  |   |
|                      | Insider's Name                          |                                     |  |   |   |  |   |
|                      | Number Street                           |                                     |  |   |   |  |   |
|                      | City                                    | State                               | Zip Code   |   |   |  |   |
| <b>✓</b>             | ide payments on<br>No                   | _                                   | aranteed or cosigne  | ·   | Total amount paid                           | Amount you still owe                         | Reason for this payment  Include creditor's name  |
|                      | Insider's Name                          |                                     |  |   |   |  |   |
|                      | Number Street                           |                                     |  |   |   |  |   |
| _                    | City                                    | State                               | Zip Code   |   |   |  |   |
|                      | Insider's Name                          |                                     |  |   |   |  |   |
|                      | Number Street                           |                                     |  |   |   |  |   |
|                      | City                                    | State                               | Zip Code   |   |   |  |   |

#### Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 41 of 65

Stewart Debtor 1 Lamare Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No **V** Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City Zip Code State Property was attached, seized, or levied.

# Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 42 of 65

| Debtor  | 1 Lamare                                      |  | Stewart                        | Case number (if known)           |                          |                     |
|---------|---|--|--------------------------------|----------------------------------|--------------------------|---------------------|
|         | First Name                                    | Middle Name  | Last Name                      | <u> </u>                         |                          |                     |
|         |   | u filed for bankruptcy, di<br>ke a payment because y     |                                | ank or financial institution, se | et off any amou          | unts from your      |
| Γ.      | No  |  |                                |                                  |                          |                     |
| <u></u> | Yes. Fill in the details                      |  |                                |                                  |                          |                     |
| L       | Tes. Fill III the details                     | •  |                                |                                  |                          |                     |
|         |   |  | Describe the action the        |                                  | Date action was taken    | Amount              |
|         |   |  |                                |                                  | was taken                |                     |
|         |   |  | _                              |                                  |                          |                     |
|         | Creditor's Name                               |  |                                |                                  |                          |                     |
|         | N b Ob  |  | -                              |                                  |                          |                     |
|         | Number Street                                 |  |                                |                                  |                          |                     |
|         |   |  | Last 4 digits of account r     | number: XXXX-                    |                          |                     |
|         |   |  |                                |                                  |                          |                     |
|         | City Sta                                      | ate Zip Code   | =                              |                                  |                          |                     |
|         |   |  |                                |                                  |                          |                     |
|         |   | filed for bankruptcy, was<br>stodian, or another officia |                                | possession of an assignee for    | the benefit of o         | creditors, a court- |
| I.      | No  |  |                                |                                  |                          |                     |
|         | TYes  |  |                                |                                  |                          |                     |
| L       | 100   |  |                                |                                  |                          |                     |
| Part 5: | List Certain Gifts a                          | nd Contributions   |                                |                                  |                          |                     |
|         |   |  |                                |                                  |                          |                     |
| 13. \   | Within 2 years before yo                      | u filed for bankruptcy, di                               | d you give any gifts with a to | otal value of more than \$600 p  | er person?               |                     |
| Г       | <b>√</b> No                                   |  |                                |                                  |                          |                     |
| ļ       | <u>·                                     </u> | o for each aift  |                                |                                  |                          |                     |
| L       | Yes. Fill in the details                      | -  |                                |                                  |                          |                     |
|         | Gifts with a total val<br>per person          | ue of more than \$600                                    | Describe the gifts             |                                  | Dates you gave the gifts | Value               |
|         |   |  |                                |                                  |                          |                     |
|         | Person to Whom You                            | Gave the Gift  | -                              |                                  |                          |                     |
|         |   | date and date  |                                |                                  |                          |                     |
|         |   |  | -                              |                                  |                          |                     |
|         | Number Street                                 |  | -                              |                                  |                          |                     |
|         |   |  |                                |                                  |                          |                     |
|         | City Sta                                      | ate Zip Code   | -                              |                                  |                          |                     |
|         | Person's relationship t                       | o you  |                                |                                  |                          |                     |
|         | ·<br>   |  |                                |                                  |                          |                     |
|         |   |  |                                |                                  |                          |                     |
|         | Person to Whom You                            | Gave the Gift  | -                              |                                  |                          |                     |
|         |   |  | _                              |                                  |                          |                     |
|         |   |  |                                |                                  |                          |                     |
|         | Number Street                                 |  | -                              |                                  |                          |                     |
|         |   |  | _                              |                                  |                          |                     |
|         | City Sta                                      | ate Zip Code   | -                              |                                  |                          |                     |
|         | Person's relationship t                       | o you  |                                |                                  |                          |                     |
|         |   |  |                                |                                  |                          |                     |

# Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 43 of 65

| btor 1 | Lamare   |   | Stewart  | Case number (if know          | wn)                               |                        |
|--------|--|---|--|-------------------------------|-----------------------------------|------------------------|
|        | First Name Middle  | lle Name  | Last Name  | <u> </u>                      | ·                                 |                        |
|        |  |   |  |                               |                                   |                        |
| . Wit  | thin 2 years before you filed for bank   | kruptcy, did yo   | u give any gifts or contribu   | tions with a total value      | of more than \$600                | to any charity?        |
|        | L NI=  |   |  |                               |                                   |                        |
| ✓      | No   |   |  |                               |                                   |                        |
|        | Yes. Fill in the details for each gift o   | or contribution.  |  |                               |                                   |                        |
|        | Gifts or contributions to charities  |   | Describe what you contri   | لمديط                         | Data way                          | Value                  |
|        | that total more than \$600   |   | Describe what you contri   | butea                         | Date you contributed              | Value                  |
|        | that total more than \$000   |   |  |                               | Contributed                       |                        |
|        |  |   |  |                               |                                   |                        |
|        | Charity's Name   | -   |  |                               |                                   |                        |
|        | -  |   |  |                               |                                   |                        |
|        |  |   |  |                               |                                   |                        |
|        | Number Street  |   |  |                               |                                   |                        |
|        | Number Street  |   |  |                               |                                   |                        |
|        | City State Zi  | ip Code   |  |                               |                                   |                        |
|        | City State Zij   | ip Code   |  |                               |                                   |                        |
|        | List Certain Losses  |   |  |                               |                                   |                        |
| · U.   | List Oci tairi Losses  |   |  |                               |                                   |                        |
|        | Yes. Fill in the details.  Describe the property you lost and how the loss occurred  | d   | Describe any insurance of Include the amount that ins  | surance has paid. List        | Date of your loss                 | Value of property lost |
|        |  |   | pending insurance claims of  | on line 33 of <i>Schedule</i> |                                   |                        |
|        |  |   | A/B: Property.   |                               |                                   |                        |
|        |  |   |  |                               |                                   |                        |
|        |  |   |  |                               |                                   |                        |
|        | List Cartain Daymanta or Trans   | ofowo   |  |                               |                                   |                        |
| . Wit  | List Certain Payments or Trans thin 1 year before you filed for bankrout seeking bankruptcy or preparing   | ruptcy, did you<br>g a bankruptcy                       | petition?  |                               |                                   | anyone you consulte    |
| . Wit  | thin 1 year before you filed for bankrout seeking bankruptcy or preparing<br>lude any attorneys, bankruptcy petition<br>No   | ruptcy, did you<br>g a bankruptcy                       | petition?  |                               |                                   | anyone you consulte    |
| . Wit  | thin 1 year before you filed for bankr<br>out seeking bankruptcy or preparing<br>lude any attorneys, bankruptcy petition   | ruptcy, did you<br>g a bankruptcy                       | petition?  |                               |                                   | anyone you consulte    |
| Wit    | thin 1 year before you filed for bankrout seeking bankruptcy or preparing<br>lude any attorneys, bankruptcy petition<br>No   | ruptcy, did you<br>g a bankruptcy                       | petition?  | services required in your b   | Date payment or transfer          | Amount of payment      |
| Wit    | thin 1 year before you filed for bankrout seeking bankruptcy or preparing lude any attorneys, bankruptcy petition  No  Yes. Fill in the details.   | ruptcy, did you<br>g a bankruptcy                       | petition? redit counseling agencies for some period of the counselin | services required in your b   | Date payment or transfer was made | Amount of payment      |
| Wit    | thin 1 year before you filed for bankrout seeking bankruptcy or preparing lude any attorneys, bankruptcy petition No Yes. Fill in the details.  Semrad Law Firm  | ruptcy, did you<br>g a bankruptcy                       | redition? redit counseling agencies for s  Description and value of a  | services required in your b   | Date payment or transfer          | Amount of              |
| Wit    | chin 1 year before you filed for bankrout seeking bankruptcy or preparing lude any attorneys, bankruptcy petition No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid  | ruptcy, did you<br>g a bankruptcy                       | petition? redit counseling agencies for some period of the counselin | services required in your b   | Date payment or transfer was made | Amount of payment      |
| Wit    | chin 1 year before you filed for bankrout seeking bankruptcy or preparing lude any attorneys, bankruptcy petition No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue  | ruptcy, did you<br>g a bankruptcy                       | petition? redit counseling agencies for some period of the counselin | services required in your b   | Date payment or transfer was made | Amount of payment      |
| Wit    | chin 1 year before you filed for bankrout seeking bankruptcy or preparing lude any attorneys, bankruptcy petition No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid  | ruptcy, did you<br>g a bankruptcy                       | petition? redit counseling agencies for some period of the counselin | services required in your b   | Date payment or transfer was made | Amount of payment      |
| Wit    | chin 1 year before you filed for bankrout seeking bankruptcy or preparing lude any attorneys, bankruptcy petition No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue  | ruptcy, did you<br>g a bankruptcy                       | petition? redit counseling agencies for some period of the counselin | services required in your b   | Date payment or transfer was made | Amount of payment      |
| Wit    | chin 1 year before you filed for bankrout seeking bankruptcy or preparing lude any attorneys, bankruptcy petition No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  | ruptcy, did you<br>g a bankruptcy<br>n preparers, or cr | petition? redit counseling agencies for some period of the counselin | services required in your b   | Date payment or transfer was made | Amount of payment      |
| Wit    | chin 1 year before you filed for bankrout seeking bankruptcy or preparing lude any attorneys, bankruptcy petition No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 6   | ruptcy, did you<br>g a bankruptcy<br>n preparers, or cr | petition? redit counseling agencies for some period of the counselin | services required in your b   | Date payment or transfer was made | Amount of payment      |
| Wit    | chin 1 year before you filed for bankrout seeking bankruptcy or preparing lude any attorneys, bankruptcy petition No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 6   | ruptcy, did you<br>g a bankruptcy<br>n preparers, or cr | petition? redit counseling agencies for some period of the counselin | services required in your b   | Date payment or transfer was made | Amount of payment      |
| Wit    | chin 1 year before you filed for bankrout seeking bankruptcy or preparing lude any attorneys, bankruptcy petition No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 6 City State Zig  | ruptcy, did you<br>g a bankruptcy<br>n preparers, or cr | petition? redit counseling agencies for some period of the counselin | services required in your b   | Date payment or transfer was made | Amount of payment      |
| Wit    | chin 1 year before you filed for bankrout seeking bankruptcy or preparing lude any attorneys, bankruptcy petition No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 6   | ruptcy, did you<br>g a bankruptcy<br>n preparers, or cr | petition? redit counseling agencies for some period of the counselin | services required in your b   | Date payment or transfer was made | Amount of payment      |
| Wit    | chin 1 year before you filed for bankrout seeking bankruptcy or preparing lude any attorneys, bankruptcy petition  No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 6 City State Zig   | ruptcy, did you<br>g a bankruptcy<br>n preparers, or cr | petition? redit counseling agencies for some period of the counselin | services required in your b   | Date payment or transfer was made | Amount of payment      |
| Wit    | chin 1 year before you filed for bankrout seeking bankruptcy or preparing lude any attorneys, bankruptcy petition No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 6 City State Zig  | ruptcy, did you<br>g a bankruptcy<br>n preparers, or cr | petition? redit counseling agencies for some period of the counselin | services required in your b   | Date payment or transfer was made | Amount of payment      |
| . Wit  | chin 1 year before you filed for bankrout seeking bankruptcy or preparing lude any attorneys, bankruptcy petition  No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 6 City State Zig   | ruptcy, did you<br>g a bankruptcy<br>n preparers, or cr | petition? redit counseling agencies for some period of the counselin | services required in your b   | Date payment or transfer was made | Amount of payment      |
| . Wit  | chin 1 year before you filed for bankrout seeking bankruptcy or preparing lude any attorneys, bankruptcy petition  No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 6 City State Zig   | ruptcy, did you<br>g a bankruptcy<br>n preparers, or cr | petition? redit counseling agencies for some period of the counselin | services required in your b   | Date payment or transfer was made | Amount of payment      |
| . Wit  | chin 1 year before you filed for bankrout seeking bankruptcy or preparing lude any attorneys, bankruptcy petition  No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 6 City State Zij  Email or website address  Person Who Made the Payment, if No Person Who Was Paid              | ruptcy, did you<br>g a bankruptcy<br>n preparers, or cr | petition? redit counseling agencies for some period of the counselin | services required in your b   | Date payment or transfer was made | Amount of payment      |
| . Wit  | chin 1 year before you filed for bankrout seeking bankruptcy or preparing lude any attorneys, bankruptcy petition No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 6 City State Zi Email or website address  Person Who Made the Payment, if No                                    | ruptcy, did you<br>g a bankruptcy<br>n preparers, or cr | petition? redit counseling agencies for some period of the counselin | services required in your b   | Date payment or transfer was made | Amount of payment      |
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| . Wit  | chin 1 year before you filed for bankrout seeking bankruptcy or preparing lude any attorneys, bankruptcy petition  No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 6 City State Zij  Email or website address  Person Who Made the Payment, if No Person Who Was Paid              | ruptcy, did you<br>g a bankruptcy<br>n preparers, or cr | petition? redit counseling agencies for some period of the counselin | services required in your b   | Date payment or transfer was made | Amount of payment      |
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| . Wit  | chin 1 year before you filed for bankrout seeking bankruptcy or preparing lude any attorneys, bankruptcy petition No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 6 City State Zij Email or website address  Person Who Made the Payment, if No Person Who Was Paid Number Street | ruptcy, did you g a bankruptcy n preparers, or cr       | petition? redit counseling agencies for s  Description and value of a transferred  | services required in your b   | Date payment or transfer was made | Amount of payment      |
| . Wit  | chin 1 year before you filed for bankrout seeking bankruptcy or preparing lude any attorneys, bankruptcy petition No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 6 City State Zi Email or website address  Person Who Made the Payment, if No Person Who Was Paid  Number Street | ruptcy, did you g a bankruptcy n preparers, or cr       | petition? redit counseling agencies for s  Description and value of a transferred  | services required in your b   | Date payment or transfer was made | Amount of payment      |
| . Wit  | chin 1 year before you filed for bankrout seeking bankruptcy or preparing lude any attorneys, bankruptcy petition No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 6 City State Zij Email or website address  Person Who Made the Payment, if No Person Who Was Paid Number Street | ruptcy, did you g a bankruptcy in preparers, or cr      | petition? redit counseling agencies for s  Description and value of a transferred  | services required in your b   | Date payment or transfer was made | Amount of payment      |

## Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 44 of 65

| Debto |                      | Lamare  |  | Stewart   | Case number (if known       | )                                   |                              |
|-------|----------------------|---|--|---|-----------------------------|-------------------------------------|------------------------------|
|       |                      | First Name  | Middle Name  | Last Name                                       |                             |                                     |                              |
| ļ     | help                 | o you deal with your credit<br>not include any payment or t | ors or to make payme                               |   | our behalf pay or transfe   | any property to a                   | nyone who promised to        |
|       | <b>⊻</b>             | No<br>Yes. Fill in the details.                             |  |   |                             |                                     |                              |
|       |                      |   |  | Description and value of a transferred          | ny property                 | Date payment or transfer was made   | Amount of payment            |
|       |                      | Person Who Was Paid   |  |   |                             |                                     |                              |
|       |                      | Number Street   |  |   |                             |                                     |                              |
|       |                      | City State  | Zip Code   |   |                             |                                     |                              |
| †     | t <b>he</b><br>Incli | ordinary course of your bu                                  | siness or financial aff<br>nd transfers made as se | ecurity (such as the granting of a              |                             |                                     |                              |
|       |                      |   |  | Description and value of a property transferred |                             | y property or<br>eceived or debts p | Date transfer was made       |
|       |                      | Person Who Received Trans                                   | sfer   |   |                             |                                     |                              |
|       |                      | Number Street   |  |   |                             |                                     |                              |
|       |                      | City State<br>Person's relationship to you                  | Zip Code   |   |                             |                                     |                              |
|       |                      | Person Who Received Trans                                   | sfer   |   |                             |                                     |                              |
|       |                      | Number Street   |  |   |                             |                                     |                              |
|       |                      | City State<br>Person's relationship to you                  | Zip Code   |   |                             |                                     |                              |
| ļ     | ben                  | eficiary?<br>ese are often called asset-pro<br>No           |  | you transfer any property to a                  | a self-settled trust or sin | nilar device of whi                 | ch you are a                 |
|       |                      | Yes. Fill in the details.                                   |  | Description and value of                        | the property transferred    |                                     | Date<br>transfer was<br>made |
|       |                      | Name of trust   |  |   |                             |                                     |                              |

#### Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 45 of 65

Stewart Debtor 1 Lamare Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was number instrument before closed, sold, closing or moved, or transfer transferred Chase Checking XXXX-0000 12/01/2016 \$ 13.00 Person Who Was Paid Savings Po Box 9001871 Number Street Money market Brokerage 40290 Louisville Kentucky Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Number Street City State Zip Code

City

State

Zip Code

#### Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 46 of 65

Stewart Debtor 1 Lamare Case number (if known) Middle Name First Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

## Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 47 of 65

| Debt |          | Lamare                        | Middle News  | Stewart                     | Case number               | (if known)  |                    |
|------|----------|-------------------------------|--|-----------------------------|---------------------------|---|--------------------|
|      |          | First Name                    | Middle Name  | Last Name                   |                           |   |                    |
| 26.  | _        |                               | n any judicial or administ                                 | rative proceeding under     | any environmental law?    | Include settlements and orde                          | rs.                |
|      |          | No<br>Yes. Fill in the detail | S.   |                             |                           |   |                    |
|      |          |                               |  | Court or agency             | Nature                    | of the case   | Status of the case |
|      |          | Case title                    |  | Court Name                  |                           |   | Pending            |
|      |          | Case number                   |  | NumberStreet                |                           |   | On appeal          |
|      |          |                               |  | City State                  | Zip Code                  |   | Concluded          |
| Part | 11:      | Give Details Abo              | ut Your Business or C                                      | onnections to Any Bu        | siness                    |   |                    |
| 27.  | With     | nin 4 years before yo         | ou filed for bankruptcy, di                                | d you own a business or     | have any of the following | connections to any business                           | ?                  |
|      |          |                               | or or self-employed in a tr<br>limited liability company ( | •                           | -                         | part-time   |                    |
|      |          | A partner in a p              |  | LLO) or invited hability pa | THOISING (EEL)            |   |                    |
|      |          |                               | ctor, or managing executi                                  | •                           |                           |   |                    |
|      |          | An owner of at                | least 5% of the voting or                                  | equity securities of a corp | poration                  |   |                    |
|      | <b>V</b> |                               | ove applies. Go to Part 12<br>apply above and fill in the  |                             | ulcinoce                  |   |                    |
|      | Ш        | 165. Officer all triat        | apply above and hill in the                                |                             | ire of the business       | Employer Identification no                            | ımber Do not       |
|      |          |                               |  |                             |                           | include Social Security nu                            | ımber or ITIN.     |
|      |          | Business Name                 |  | _                           |                           | EIN:  |                    |
|      |          | Number Street                 |  | Name of accounts            | ant or bookkeeper         | Dates business existed                                |                    |
|      |          | City                          | State Zip Code   |                             |                           | From To   |                    |
|      |          |                               |  |                             |                           |   |                    |
|      |          |                               |  | Describe the natu           | re of the business        | Employer Identification no include Social Security no |                    |
|      |          | Business Name                 |  |                             |                           | EIN:  |                    |
|      |          | Number Street                 |  | _                           |                           | Dates business existed                                |                    |
|      |          | City                          | State Zip Code   | Name of accounta            | ant or bookkeeper         | From To   |                    |
|      |          | 2.1,                          |  |                             |                           | From To   |                    |
|      |          |                               |  |                             |                           |   |                    |
|      |          |                               |  | Describe the natu           | re of the business        | Employer Identification no include Social Security no |                    |
|      |          | Business Name                 |  | _                           |                           | EIN:  |                    |
|      |          | Number Street                 |  | Name of accounts            | ant or bookkeeper         | Dates business existed                                |                    |
|      |          | City                          | State Zip Code   |                             | o. bookkoopei             | From To   |                    |
|      |          |                               |  |                             |                           |   |                    |

# Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 48 of 65

| Deb  | tor 1 Lama   | е   |                               |   | Stewart                       | Case number (if known)   |
|------|--------------|---|-------------------------------|---|-------------------------------|--|
|      | First N      | ame   |                               | Middle Name                               | Last Name                     |  |
| 28.  | creditors No | years before<br>, or other pa<br>Fill in the de | rrties.                       | bankruptcy, did y                         | ou give a financial stateme   | nt to anyone about your business? Include all financial institutions,  |
|      |              |   |                               |   | Date issued                   |  |
|      |              |   |                               |   |                               |  |
|      | Nan          | ie  |                               |   | MM/DD/YYYY                    |  |
|      | Nicon        | . L. au. Otus at                                |                               |   | <u> </u>                      |  |
|      | Nun          | ber Street                                      |                               |   |                               |  |
|      | City         |   | State                         | Zip Code                                  | <u> </u>                      |  |
|      |              |   | Oldio                         | <b>p</b>                                  |                               |  |
| Part | 112: Sigi    | n Below   |                               |   |                               |  |
| t    | true and c   | orrect. I und<br>cy case can                    | erstand that<br>result in fin | making a false sta<br>es up to \$250,000, | atement, concealing prope     | ents, and I declare under penalty of perjury that the answers are rty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
|      |              | /S/   | Lamare Stew                   |   |                               | Signature of Debtor 2  |
|      |              | Signa   | ture of Debtor                | 1   |                               |  |
|      |              | Date  | 3/3/2017                      |   |                               | Date   |
|      | Did vou att  | ach additio                                     | nal nagge to                  | Vour Statement of                         | Einanaial Affaire for Indivi  | duals Filing for Bankruptcy (Official Form 107)?   |
|      | Diu you att  | acii auditioi                                   | iai pages to                  | Tour Statement of                         | Financial Analis for indivi-  | duals Filling for Bankruptcy (Official Form 107):  |
|      | <b>✓</b> No  |   |                               |   |                               |  |
|      | Yes          |   |                               |   |                               |  |
|      | Did you pa   | or agree to                                     | pay someoi                    | ne who is not an at                       | torney to help you fill out I | pankruptcy forms?  |
| Г    | <b>√</b> No  |   |                               |   |                               |  |
|      | _            | ame of perso                                    | n                             |   |                               | Attach the Bankruptcy Petition Preparer's Notice,  |
| _    |              |   |                               |   |                               | Declaration, and Signature (Official Form 119).  |

Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 49 of 65

B2030 (Form 2030) (12/15)

#### **UNITED STATES BANKRUPTCY COURT**

|           |   | Norther                 | n District of Illinois      |                    |   |
|-----------|---|-------------------------|-----------------------------|--------------------|---|
| In re     | Lamare Stewart  |                         |                             | Case No.           |   |
|           | Debtor  |                         |                             |                    | (If known)  |
|           |   |                         |                             | Chapter            | Chapter 13  |
| C         | ISCLOSURE OF  | COMPENS                 | ATION OF AT                 | <b>FORNEY F</b>    | FOR DEBTOR  |
| comp      | ensation paid to me within or   | e year before the filir | ng of the petition in bankr | uptcy, or agreed t | ovenamed debtor(s) and that<br>to be paid to me, for services<br>e bankruptcy case is as follows: |
| For le    | gal services, I have agreed to  | accept                  |                             |                    | \$4,000.00  |
| Prior t   | to the filing of this statement   | I have received         |                             |                    | \$350.00  |
| Balan     | ce Due  |                         |                             |                    | \$3,650.00  |
| 2. The so | ource of the compensation pa  | aid to me was:          |                             |                    |   |
|           | <b>✓</b> Debtor   | Other                   | (specify)                   |                    |   |
| 3. The so | ource of the compensation pa  | aid to me is:           |                             |                    |   |
|           | <b>✓</b> Debtor   | Other                   | (specify)                   |                    |   |
|           | nave not agreed to share the a<br>nembers and associates of my                                    |                         | pensation with any other    | person unless the  | ey are  |
| Шm        | nave agreed to share the above<br>lembers or associates of my li<br>le people sharing in the comp | aw firm. A copy of the  | e agreement, together with  |                    |   |
|           | irn for the above-disclosed fe<br>. Analysis of the debtor's fina<br>bankruptcy;                  |                         |                             |                    | kruptcy case, including:<br>ng whether to file a petition in                                      |
| b         | . Preparation and filing of an  | y petition, schedules   | , statements of affairs and | d plan which may   | be required;  |
| С         | . Representation of the debto   | or at the meeting of c  | reditors and confirmation   | hearing, and any   | adjourned hearings thereof;   |
| d         | . Representation of the debto   | or in adversary procee  | edings and other conteste   | ed bankruptcy ma   | tters;  |
| 6. By ag  | reement with the debtor(s), th  | e above-disclosed fe    | e does not include the fol  | lowing services:   |   |
|           |   |                         |                             |                    |   |
|           |   | С                       | ERTIFICATION                |                    |   |
|           | that the foregoing is a compl<br>this bankruptcy proceedings                                      |                         | agreement or arrangemer     | nt for payment to  | me for representation of the  |
|           | 3/3/2017  |                         | /s/ Me                      | gan Holmes         |   |
|           | Date  |                         |                             | re of Attorney     |   |
|           |   |                         | Semra                       | ad Law Firm        |   |
|           |   |                         |                             | of law firm        |   |

Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 50 of 65

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

#### Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 51 of 65

6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

#### Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 52 of 65

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff, some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$61.76 for expenses, leaving a balance due of \$4,021.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Debtor(s | s)                     | Attorney for Debtor | (s)     |
|----------|------------------------|---------------------|---------|
|          |                        | /s/ Megan Holmes    | Megyras |
| /s/ Robe | ert Greene MOOUD Green |                     |         |
| Signed:  | 0.                     |                     | A       |
| Date:    | 3/2/2017               |                     |         |

Do not sign if the fee amounts at top of this page are blank.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

|   | \$245 | filing fee         |
|---|-------|--------------------|
|   | \$75  | administrative fee |
| + | \$15  | trustee surcharge  |
|   | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

|   | \$1,167 | filing fee         |
|---|---------|--------------------|
| + | \$550   | administrative fee |
|   | \$1,717 | total fee          |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

## Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to:
<a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 59 of 65

#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re:        | Stewart, Lamare | Case No  |                                      |
|---------------|-----------------|--|--------------------------------------|
|               | Debtor(s)       | Case NO.                                       |                                      |
|               |                 | Chapter.                                       | Chapter13                            |
|               | VERIF           | ICATION OF CREDITOR MAT                        | TRIX                                 |
| T<br>knowledg |                 | rify that the attached list of creditors is tr | rue and correct to the best of their |
| Date:         | 3/3/2017        | /s/ Stewart, Lam<br>Stewart, Lamare            |                                      |
|               |                 | Signature of Del                               | btor                                 |

MID ATLANTIC FINANCE 4592 ULMERTON RD STE 200 CLEARWATER, FL, 33762

CONVERGENT OUTSOURCING 800 SW 39TH ST RENTON, WA, 98057

CHASE CARD PO BOX 15298 WILMINGTON, DE, 19850

IL DEPT OF HEALTHCARE 509 S 6TH ST SPRINGFIELD, IL, 62701

Illinois Department of Human & Family Services 509 S. 6th St. Springfield, IL, 62701

Newman, Jessica c/o Department of Human Services 3910 Ogden Ave Chicago, IL, 60623

City of Chicago Parking 121 N. LaSalle St # 107A Chicago, IL, 60602

HARRIS & HARRIS LTD 222 Merchandise Mart Plaza, Suite 1900 Chicago, IL, 60654

Speedy Cash Po Box 101928 Birmingham, AL, 35210

Americash 880 Lee St Ste 302 Des Plaines, IL, 60016

Payne, Jocylen c/o Illinois Department of Human Services 3910 Ogden Ave Chicago, IL, 60623

# Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 61 of 65

| Debtor 1 Robert   | Q.<br>Middle Name  | Greene<br>Last Name  | Case number (if known   | 9   |
|---|--|--|---|---|
| First Name  Part 6: Answer These Que  | estions for Reporting Purpo  |  |   |   |
| 16. What kind of debts do<br>you have?  | 16a. Are your debts prima "incurred by an indivi- □ No. Go to line 16 □ Yes. Go to line 17 16b. Are your debts prima money for a business □ No. Go to line 16 □ Yes. Go to line 17   | arily consumer dedual primarily for a co.  The consumer description of the consumer description or the consumer description of the consumer de | a personal, family, or househ   | ts that you incurred to obtain business or investment.  |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | No. I am not filing under  Yes. I am filing under Chaexpenses are paid to No.  Yes.  | apter 7. Do you estin  |   | perty is excluded and administrative ed creditors?  |
| 18. How many creditors<br>do you estimate that<br>you owe?  | ✓ 1-49<br>☐ 50-99<br>☐ 100-199<br>☐ 200-999  | <b>=</b> 5,00  | 00-5,000<br>01-10,000<br>001-25,000   | 25,001-50,000<br>50,001-100,000<br>More than 100,000  |
| 19. How much do you estimate your assets to be worth?   | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million   | \$10<br>\$50   | 000,001-\$10 million<br>1,000,001-\$50 million<br>1,000,001-\$100 million<br>10,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| <sup>20.</sup> How much do you<br>estimate your<br>liabilities to be?   | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million   | \$10<br>\$50   | 000,001-\$10 million<br>0,000,001-\$50 million<br>0,000,001-\$100 million<br>0,000,001-\$500 million  | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Part 7: Sign Below  |  |  | der populty of porium, that t   | ha information provided is true and   |
| For you   | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill |  |   |   |
|   | out this document, I have o  | e and I did not pay<br>obtained and read t   | or agree to pay someone w<br>the notice required by 11 U.   | S.C. § 342(b).  |
| - many  | I request relief in accordance   | ce with the chapter  | r of title 11, United States C  | ode, specified in this petition.  |
|   | I understand making a false<br>connection with a bankrup<br>both. 18 U.S.C. §§ 152, 13   | tcy case can result  | in fines up to \$250,000, or  | money or property by fraud in imprisonment for up to 20 years, or   |
|   | /s/ Robert Greene // Signature of Debtor 1   | <u>Mono S.</u>   | Signature of  | Debtor 2  |
|   | Executed on 3/2/20   | 017<br>1 / DD / YYYY   | Executed o  | ON MM / DD / YYYY   |

Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 62 of 65

| Fill in this info               | rmation to identify your cas   | 3 <b>0</b> : 4                                     |   |   |            |
|---------------------------------|--|--|---|---|------------|
| Debtor 1                        | Robert   | Q.   | Greene  | _   |            |
|                                 | First Name   | Middle Name  | Last Name   |   |            |
| Debtor 2<br>(Spouse, if filing) | First Name   | Middle Name  | Last Name   | -   |            |
| United States                   | Bankruptcy Court for the:  | Northern   | District of Illinois (State)  | _   |            |
| Case number                     |  |  | `   |   |            |
| (If known)                      |  |  |   | Check if  | this is an |
| Official                        | Form 106Dec  | <u>.</u>   |   | amended .   | d filing   |
| Declarat                        | tion About an I  | ndividual Debi                                     | tor's Schedules   |   | 12/15      |
| f two married                   | l people are filing together   | r, both are equally respo                          | nsible for supplying correct  | nformation.   |            |
| money or prop<br>U.S.C. §§ 152, | this form whenever you fil<br>perty by fraud in connectio<br>, 1341, 1519, and 3571.<br>n Below  | e bankruptcy schedules<br>on with a bankruptcy cas | or amended schedules. Mak<br>se can result in fines up to \$?                 | ing a false statement, concealing property, or obtaini<br>250,000, or imprisonment for up to 20 years, or both. 1 | ng<br>18   |
| Did you <sub>l</sub>            | And the second s | one who is NOT an attorn                           | ney to help you fill out bankru  Attach Bankruptcy Pe Signature (Official For | tition Preparer's Notice, Declaration, and  |            |
|                                 | enalty of perjury, I declare   | that I have read the sur                           | nmary and schedules filed w   | ith this declaration and  |            |

Signature of Debtor 2

MM/DD/YYYY

X /s/ Robert Greene -

Signature of Debtor 1

Date 3/2/2017 MM/DD/YYYY

## Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 63 of 65

| ebtor 1                   | Robert                                  |  | Q.                                  | Greene  | Case number (if known)  |
|---------------------------|---|--|-------------------------------------|---|---|
|                           | First Name                              |  | Middle Name                         | Last Name   |   |
| i. Witi                   | hin 2 years<br>ditors, or o             | before you filed for<br>ther parties.  | bankruptcy, did y                   | you give a financial state                            | ment to anyone about your business? Include all financial institutions  |
|                           | No<br>Yes, Fill in                      | the details below.   |                                     |   |   |
| أسسا                      |   |  |                                     | Date issued   |   |
|                           |   |  |                                     | MM/DD/YYYY  | <del></del>   |
|                           | Name                                    |  |                                     | 171100 207  |   |
|                           | Number                                  | Street   |                                     |   | ,   |
|                           |   | State  | Zip Code                            |   |   |
|                           | City                                    | State  | Zip Code                            |   |   |
|                           |   |  |                                     |   |   |
| l hav                     | e read the                              | answers on this Sta  |                                     | tatament cancealing bro                               | hments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with |
| l hav                     | e read the                              | answers on this <i>Sta</i> t. I understand that use can result in fine /s/ Robert Greer  | making a false stes up to \$250,000 | tatament cancealing bro                               | to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.   |
| l hav                     | e read the<br>and correc<br>nkruptcy ca | answers on this <i>Sta</i><br>t. I understand that<br>use can result in find   | making a false stes up to \$250,000 | tatement, concealing pro<br>), or imprisonment for up | to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.   |
| l hav                     | e read the<br>and correc<br>nkruptcy ca | answers on this Sta t. I understand that use can result in fine /s/ Robert Greer Signature of Debtor                                   | making a false stes up to \$250,000 | tatement, concealing pro<br>), or imprisonment for up | to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.   |
| I have<br>true :<br>a bar | e read the and correct hkruptcy ca      | answers on this Sta t. I understand that use can result in fine /s/ Robert Greer Signature of Debtor  Date 3/2/2017                    | making a false stes up to \$250,000 | tatement, concealing pro                              | Signature of Debtor 2  Date   |
| I have<br>true :<br>a bar | e read the and correct hkruptcy ca      | answers on this Sta t. I understand that use can result in fine /s/ Robert Greer Signature of Debtor  Date 3/2/2017                    | making a false stes up to \$250,000 | tatement, concealing pro                              | to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.   |
| I have true a bar         | e read the and correct hkruptcy ca      | answers on this Sta t. I understand that use can result in fine /s/ Robert Greer Signature of Debtor  Date 3/2/2017                    | making a false stes up to \$250,000 | tatement, concealing pro                              | to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 2  Date  |
| Did y                     | e read the and correct hkruptcy ca      | answers on this Sta t. I understand that use can result in fine /s/ Robert Greer Signature of Debtor Date 3/2/2017 additional pages to | making a false stes up to \$250,000 | of Financial Affairs for Inc                          | Signature of Debtor 2 Date  dividuals Filling for Bankruptcy (Official Form 107)?   |
| Did y                     | e read the and correct hkruptcy ca      | answers on this Sta t. I understand that use can result in fine /s/ Robert Greer Signature of Debtor Date 3/2/2017 additional pages to | making a false stes up to \$250,000 | tatement, concealing pro                              | Signature of Debtor 2 Date  dividuals Filling for Bankruptcy (Official Form 107)?   |
| Did y                     | e read the and correct hkruptcy ca      | answers on this Sta t. I understand that use can result in fine /s/ Robert Greer Signature of Debtor Date 3/2/2017 additional pages to | making a false stes up to \$250,000 | of Financial Affairs for Inc                          | Signature of Debtor 2 Date  dividuals Filling for Bankruptcy (Official Form 107)?   |

# Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 64 of 65

| Debto | or 1 Robert<br>First Name        | Q.<br>Middle Name   | Greene<br>Last Name                                      | Case number (if known)   |  |
|-------|----------------------------------|---|--|--|--|
| 16.   | Calculate th                     | e median family income that applies to  | you. Follow these step                                   | p to the control of t | The second secon |
|       |                                  | e state in which you live.  | Illinois   | _  | and my section   |
|       | 16b. Fill in th                  | e number of people in your household.   | 1  | _  | I ERHOLI VIPA HAMPA  |
|       | househ                           | e median family income for your state and s<br>old<br>e link specified in the separate instructions t   | To fir   | nd a list of applicable median income amounts, go online may also be available at the bankruptcy clerk's office.   | \$50,133.00  |
| 17.   |                                  | ines compare?   |  |  | AL INDIA VANA  |
|       | 17a. 🔽 Line                      | e 15b is less than or equal to line 16c. On ti<br>der 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> E  | ne top of page 1 of thi<br>o NOT fill out <i>Calcula</i> | is form, check box 1, Disposable income is not determined tion of Disposable Income (Official Form 122C-2).  | e e description  |
|       | "" U.S                           | e 15b is more than line 16c. On the top of p<br>c.C. § 1325(b)(3). <b>Go to Part 3 and fill out</b><br>n, copy your current monthly income from | Calculation of Dispo                                     | neck box 2, Disposable income is determined under 11 osable Income (Official Form 122C-2). On line 39 of that  | a de principal de la constante |
| Part  | 3: Calcula                       | te Your Commitment Period Under   | 11 U.S.C. §1325(   | b)(4)  | VALUE VA   |
| 18.   |                                  | tal average monthly income from line 1  |  |  | \$1,561.42   |
| 19.   | Deduct the commitment            | narital adjustment if it applies. If you are period under 11 U.S.C. § 1325(b)(4) allows   | married, your spouse<br>you to deduct part of            | is not filing with you, and you contend that calculating the fyour spouse's income, copy the amount from line 13.  | Annual An |
|       | 19a. If the m                    | arital adjustment does not apply, fill in 0 on  | line 19a.  |  | -\$0.00  |
|       | 19b. Subtrac                     | et line 19a from line 18.   |  |  | \$1,561.42   |
| 20.   | Calculate yo                     | our current monthly income for the year.  | Follow these steps:                                      |  |  |
|       | 20a. Copy lin                    | e 19b.  |  |  | \$1,561.42   |
|       | Multiply                         | by 12 (the number of months in a year).   |  |  | x 12   |
|       | 20b. The res                     | ult is your current monthly income for the ye   | ear for this part of the                                 | form.  | \$18,737.04  |
|       | 20c. Copy th                     | e median family income for your state and s   | size of household from                                   | n line 16c.  | \$50,133.00  |
| 21.   |                                  | lines compare?  |  |  | , rosperi  |
|       |                                  | is less than line 20c. Unless otherwise ordenent period is 3 years. Go to Part 4.   | ered by the court, on t                                  | he top of page 1 of this form, check box 3, The  |  |
|       |                                  | is more than or equal to line 20c. Unless o commitment period is 5 years. Go to Part 4.   | therwise ordered by th                                   | ne court, on the top of page 1 of this form, check box   |  |
| Part  | 4: Sign Be                       | low   |  |  |  |
|       | By signir                        | g here, I declare under penalty of perjury th   | at the information on                                    | this statement and in any attachments is true and correct.   |  |
|       |                                  | Robert Greene ANGLOCKS ature of Debtor 1  | mu !   | Signature of Debtor 2  |  |
|       | Date                             | 3/3/2017<br>MM/DD/YYYY  |  | Date MM/DD/YYYY  |  |
|       | If you ch<br>If you ch<br>above. | ecked 17a, do NOT fill out or file Form 122<br>ecked 17b, fill out Form 122C-2 and file it t  | C-2.<br>with this form. On line                          | 39 of that form, copy your current monthly income from lin   | e 14   |

Case 17-06436 Doc 1 Filed 03/03/17 Entered 03/03/17 09:34:25 Desc Main Document Page 65 of 65

#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| in re:          | Debtor(s) | Case No  |                                      |
|-----------------|-----------|--|--------------------------------------|
|                 |           | Chapter  | Chapter13                            |
|                 | VERI      | CICATION OF CREDITOR MA                              | TRIX                                 |
| Th<br>knowledge |           | rify that the attached list of creditors is          | rue and correct to the best of their |
| Date:           | 3/2/2017  | /s/ Greene, Rol<br>Greene, Robert<br>Signature of Do |                                      |